DOCUMENT RESUME

ED 337 639 CE 059 285

AUTHOR	Reneau, Fred; And Others
TITLE	Catalog of Performance Objectives and Performance Guides for Occupational Therapy Occupations.
INSTITUTION	Southern Illinois Univ., Carbondale. Dept. of Vocational Education Studies.
SPONS AGENCY	Illinois State Board of Education, Springfield. Dept. of Adult, Vocational and Technical Education.
PUB DATE	Jun 89
NOTE	330p.
PUB TYPE	Guides - Classroom Use - Teaching Guides (For Teacher) (052)
EDRS PRICE	MF01/PC14 Plus Postage.
DESCRIPTORS	Administrative Organization; *Behavioral Objectives; Clinical Diagnosis; Communication Skills; *Competency Based Education; Continuing Education; Job Analysis; Occupational Information; *Occupational Therapy; *Occupational Therapy Assistants; Patient Education; Program Development; Program Implementation; Task Analysis

ABSTRACT

This catalog provides a description of duties, tasks, performance objectives, performance guides, and related data in the area of occupational therapy occupations. Seven duties and their performance objectives are covered: (1) performing administrative tasks; (2) communicating information; (3) performing diagnostic measures; (4) planning therapeutic measures; (5) implementing therapeutic measures; (6) providing support services; and (7) continuing education. Each performance objective contains a task, conditions for performance of task, performance guide, and source of standard. In addition to the performance objectives and performance guides, an introduction, definitions of terms, and description, the catalog contains the following appendices: (1) tools, equipment, and work aids; (2) a five-item bibliography--sources of standards; (3) a cross-reference table of duties, tasks, and performance objectives; (4) a 74-item bibliography of state-of-the-art literature; and (5) a catalog development model. (NLA)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED337639

CATALOG OF PERFORMANCE OBJECTIVES
AND PERFORMANCE GUIDES
FOR
OCCUPATIONAL THERAPY OCCUPATIONS

CIP CODES:	17.0807	Occupational Therapy
	17.0808	Occupational Therapy Aide
	17.0809	Occupational Therapy Assisting

DOT CODES:	076.364-010	Occupational Therapy Assistant
	355.377-010	Occupational Therapy Aide

Prepared for:

Vocational-Technical Education
Consortium of States

Prepared by:

Fred Reneau
Joe Matthews
Dave Hahn
Department of Vocational Education Studies
Department of Agriculture Education and Mechanization
Southern Illinois University
Carbondale, Illinois

In cooperation with:

Peggy Pool, Technical Coordinator
Department of Adult Vocational and Technical Education
Illinois State Board of Education
100 North First Street
Springfield, IL 62777

June 1989

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality

- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

BEST COPY AVAILABLE

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

CE057285

TABLE OF CONTENTS

Page

ACKNOWLEDGEMENTS 1

INTRODUCTION 3

DEFINITIONS OF TERMS 5

V-TECS CATALOG DESCRIPTION 10

PERFORMANCE OBJECTIVES AND PERFORMANCE GUIDES 17

DUTY A: PERFORMING ADMINISTRATIVE TASKS

Task Page

File patient's records 18
Review departmental mail. 20
Plan meeting 22
Participate in interdisciplinary care plan meeting or staffing 24
Complete charge slip form 25
Complete travel reimbursement form 27
Schedule patient's appointment 29
Schedule space and equipment for therapy 31
Develop master therapy schedule 33
Maintain attendance records 35
Supervise assistants, aides and volunteers . . . 37
Train occupational therapy assistants, aides, volunteers and support persons 39
Assist with a student's clinical experience . . . 41
Develop facility's guidelines of quality treatment 43
Update facility's guidelines of quality treatment 45
Collect information for quality assurance measures 47
Develop facility's preprinted home program . . . 48
Update facility's preprinted home program . . . 51
Maintain occupational therapy resource library . 52
Collect information for budget preparation . . . 54
Compile departmental data 56
Write occupational therapy position job description 57
Complete work order for equipment 59

DUTY B: COMMUNICATING INFORMATION

Task . . . Page

Communicate using intercom 60
Communicate using telephone 61
Greet patient or visitor 63
Respond to request for service 65
Respond to request of patient's funding source 66
Conduct public relations activities 67
Refer patient to specialized service 69
Notify consulting occupational therapist or physician about developments requiring changes in patient's occupational therapy treatment plan 70
Notify patient, family or significant others about developments requiring changes in patient's occupational therapy treatment plan 72
Discuss patient information 74
Write instructions for use of orthosis, prosthesis or adaptive equipment 76
Write instructions for an occupational therapy home program 78
Write thank-you letter 80
Write progress notes 81
Write discharge note 83
Complete consent form 85
Create informational displays 87
Identify possible abuse 89
Report unsafe condition 91
Secure emergency help 93
Answer inspector's questions 94
Give professional testimony 95

DUTY C: PERFORMING DIAGNOSTIC MEASURES

Task . . . Page

Screen patient for need of occupational therapy evaluation 97
Assist with screening of patient for need of occupational therapy evaluation 99
Select evaluation components to be evaluated . . 100
Plan evaluation methodology 101
Explain evaluation plan 102
Conduct an interview 103

DUTY C: PERFORMING DIAGNOSTIC MEASURES (cont.)

Task Page

Administer test following standard procedures . . 105
Analyze evaluation data 107
Formulate evaluation recommendations 108
Record evaluation information and recommendations 109
Evaluate home or work site 110

DUTY D: PLANNING THERAPEUTIC MEASURES

Task Page

Develop a patient's occupational therapy treatment plan 112
Assist in developing a patient's occupational therapy treatment plan 114
Implement a new patient's occupational therapy orders 115
Formulate recommendations for changes in treatment plan 116
Complete prescription forms 117
Analyze tasks and activities 118
Coordinate the occupational therapy treatment plan with support persons 120
Plan a group activity 122
Assist specialist (podiatrist, orthotist or wheelchair vendor) with selection of adaptive equipment 124

DUTY E: IMPLEMENTING THERAPEUTIC MEASURES

Task Page

Prepare therapy area 125
Build rapport with patient 127
Give patient therapeutic massage 129
Give patient heat therapy 130
Give patient cold therapy 132
Train patient in eating and feeding skills . . . 134
Train patient in dressing skills 136
Train patient in clothing care skills 139
Train patient in food preparation skills 141
Train patient in grooming and hygiene skills . . 144
Train patient in money management skills 146

DUTY E: IMPLEMENTING THERAPEUTIC MEASURES (cont.)

Task Page

Train patient in time-management skills 148
Train patient in shopping skills 150
Train patient in home-cleaning skills 152
Train patient in parental skills 154
Train patient in employment preparation skills 156
Train patient in functional communications skills 157
Train patient in object manipulation skills . . . 158
Train patient in play and leisure activities . . 160
Train patient in relaxation techniques 162
Train patient in assertive behaviors 164
Train patient in energy conservation techniques 166
Train patient in joint protection techniques . . 168
Train patient in use of public transportation . . 170
Train patient in functional ambulation 172
Train patient in transfer techniques 174
Train patient in wheelchair mobility 176
Train patient in bed mobility 177
Engage patient in purposeful activities for fine and gross motor coordination 178
Engage patient in purposeful activities for strength 180
Engage patient in purposeful activities for endurance 182
Engage patient in purposeful activities for range of motion 184
Engage patient in purposeful activities for reflex integration 186
Engage patient in purposeful activities for sensory awareness 188
Engage patient in purposeful activities for sensory motor integration 190
Engage patient in purposeful activities for visual perception 192
Engage patient in purposeful activities for body awareness 194
Engage patient in purposeful activities for cognitive skills 196
Engage patient in purposeful activities for cognitive integration skills 198
Engage patient in purposeful activities for self-concept 200
Engage patient in purposeful activities for situational coping skills 203

DUTY E: IMPLEMENTING THERAPEUTIC MEASURES (cont.)

Task Page

Engage patient in purposeful activities for community involvement 205
Supervise exercises in visual tracking 207
Supervises exercises in range of motion 208
Supervise work hardening activities 210
Train patient in use of orthosis 212
Train patient in use of prosthesis 214
Train patient in use of adaptive equipment . . . 216
Retrain patient in hand dominance 218
Design system of positive and negative reinforcement 220
Provide supportive listening 222
Provide supportive environment with increasing stimulation 224
Assess reality orientation and reorient patient 226
Conduct group activities 227
Identify role models 229
Arrange for use of community and educational resources 230

DUTY F: PROVIDING SUPPORT SERVICES

Task Page

Verify patient's identification 232
Assist patient in pain 234
Escort patient 236
Position patient 237
Perform patient transfers 239
Modify patient's home or work environment 241
Assist patient in toileting during therapy . . . 243
Measure intake and output during therapy 245
Monitor patient's vital statistics during therapy 246
Report patient's behavioral statistics observed during therapy 247
Assist patient in dressing and undressing 249
Assist patient with assistive/supportive devices 252
Wash hands and arms aseptically 254
Develop individualized functional communication devices 255
Develop individualized memory assisting devices . 258
Inventory supplies and equipment 260
Order supplies and equipment 261

DUTY F: PROVIDING SUPPORT SERVICES (cont.)

Task . . . Page

Stock supplies and equipment 262
Assemble equipment 263
Evaluate equipment condition 264
Repair equipment 265
Design adaptive equipment 266
Build adaptive equipment 268
Make low temperature thermo-plastic splints . . . 269
Transport supplies to and from therapy area . . . 272
Setup supplies for therapy 273
Clean therapy area 274
Follow evacuation procedures 275

DUTY G: CONTINUING EDUCATION

Task . . . Page

Apply for certification or recertification . . . 276
Maintain first aid/CPR certification 277
Review professional research journals or sales catalogs 278
Participate in professional meetings 279
Present information at professional meeting . . . 281
Maintain professional association membership . . 283
Participate in occupational therapy inservices and workshops 284
Inservice occupational therapy staff following a continuing education course 286
Discuss ethical considerations with peers/superiors 288
Discuss procedural considerations with peers/superiors 290

APPENDICES

A. TOOLS, EQUIPMENT AND WOK AIDS 292

B. BIBLIOGRAPHY: SOURCES OF STANDARDS 300

C. CROSS-REFERENCE TABLE OF DUTIES, TASKS, AND PERFORMANCE OBJECTIVES 302

D. BIBLIOGRAPHY: STATE-OF-THE-ART LITERATURE 313

E. V-TECS CATALOG DEVELOPMENT MODEL 320

ACKNOWLEDGEMENTS

Any time a project of this magnitude is approached, the cooperation of a large number of dedicated and talented people with a variety of expertise is required to complete the task successfully. Southern Illinois University believes that this was accomplished in the development of the Occupational Therapy Occupations Catalog.

Among the many persons to be thanked are the members of the writing team: Terri Anderson, Occupational Therapy Assistant, Belleville Area Special Education District, Belleville, IL; Joan Juul, Registered Occupational Therapist Franklin/Jefferson Special Education District, Benton, IL; Bev Loester, Occupational Therapy Aide, St. Anthony's Memorial Hospital, Effingham, IL; Karen Kelly, Registered Occupational Therapist, Carbondale Clinic, Carbondale, IL; Janis L. Maloney, Registered Occupational Therapist, Clyde Choate Mental Health & Developmental Center, Anna, IL; Cindy Siddens, Registered Occupational Therapist, St. Anthony's Memorial Hospital, Effingham, IL; Lynn Swerig, Occupational Therapy Assistant, Franklin/ Jefferson Special Education District, Benton, IL; Debora Sellers, Occupational Therapy Assistant, Franklin/Jefferson Special Education District, Benton, IL; and Josette Waller, Occupational Therapy Aide, Good Samaritan Hospital, Mt. Vernon, IL.

The draft catalog review team reacted to the Draft Catalog and provided validation and recommendations for clarifying revisions. The review team was comprised of: Susan Martin, Occupational Therapy Assistant, Galesburg Cottage Hospital, Galesburg, IL; Cindy Schoenbeck, Occupational Therapy Assistant, ECHO School, South Holland, IL; Donna Hudson, Occupational Therapy Assistant, Rural Champaign County Special Education Coop, Rantoul, IL; Elizabeth Harmening, Occupational Therapy Assistant, Blessing Hospital, Quincy, IL; Sister Mary Marjorie Mersimer, Occupational Therapy Assistant, St. Joseph's Home for the Aged, Peoria, IL; Bolaji M. Aregbesola, Occupational Therapy Aide, Lakeshore Nursing Center, Chicago, IL; Eileen Willack, Occupational Therapy Aide, Morton Terrace Ltd, Morton, IL; Virginia Larsen, Occupational Therapy Aide, McKinley Terrace, Decatur, IL; Lois Hilfrich, Occupation Therapy Aide, Village Inn Nursing Home, Dixon, IL; and Jo Ann Otto OTR/L, Senior Rehabilitation Specialist, Anna, IL.

Throughout the project a large number of incumbent workers and supervisors assisted in the development of task and tool/equipment lists. Southern Illinois University acknowledges their valuable assistance and cooperation in the completion of the occupational survey.

Recognition must also be given to the numerous state research coordinating units and industry-related agencies who responded to initial requests for information and assistance in assembling the state-of-the-art research.

Continuing throughout the project was the ready assistance provided by Dr. Ronald D. McCage and the V-TECS central staff. And finally, Southern Illinois University expresses sincere appreciation to members of the staff of the Department of Adult Vocational and Technical Education, Illinois State Board of Education for their continuing support and encouragement. To Peggy Pool, V-TECS Technical Coordinator for Illinois, we extend our special thanks for her able assistance and constant support.

INTRODUCTION

The Vocational-Technical Education Consortium of State (V-TECS) is a cooperative research and development venture currently among twenty-six states and three associate agencies. Member states are Alabama, Arizona, Arkansas, Florida, Georgia, Illinois, Indiana, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Mississippi, Missouri, New York, North Carolina, Oklahoma, Oregon, Pennsylvania, South Carolina, Utah, Virginia, Washington and West Virginia. The technical training commands of the U.S. Air Force, U.S. Army, U.S. Navy and the U.S. Marine Corps as well as the U.S. Bureau of Prisons and the International

Labor Affairs Division of the U.S. Department of Labor, hold associate memberships in the Consortium. Policy matters of V-TECS are handled by a representative Board of Directors composed of one member from each participating state, appointed by the state's Director of Vocational Education. V-TECS is an operating unit of the Commission on Occupational Education Institutions, Southern Association of Colleges and Schools.

Member states of V-TECS share services, technology, and resources for mutual benefit, eliminating duplication of effort in conducting occupational analysis and producing job-referenced vocational program data base for use in developing performance-based curricula. Catalogs of performance objectives and performance guides in selected areas of occupational education are produced and shared among the Consortium membership. Standard basic procedures are used to ensure uniformity in the products and to promote transportability of products between states. Strict adherence to the following procedures assures confidence in the products developed: (1) development of task statement booklets for a domain of job titles; (2) selection of representative sample of incumbent workers within the state which is developing the catalog; (3) administration of the task statement booklets to the incumbent worker sample; (4) computerized analysis of information collected from the sample; (5) conversion of the task statements into a catalog of performance objectives and performance guides; (6) a comprehensive field review; (7) development of the final catalog; and (8) a dissemination program. The procedures are presented in the V-TECS Technical Reference Handbook for Catalog Development.

DEFINITIONS OF TERMS

ACTIVITIES OF DAILY LIVING (ADL). The skill and performance of physical and psychological/emotional self-care, work, and play/leisure activities to a level of independence appropriate to age, life-space, and disability.

ASEPTIC. Not septic (alive); free from septic (living) materials.

ASSESSMENT. The overall process of determining the need for treatment.

ASSISTIVE/ADAPTIVE EQUIPMENT. The provision of special devices that assist in performance, and/or structural or positional changes such as the installation of ramps, bars, changes in furniture heights, adjustments of traffic patterns, and modifications of wheelchairs.

CATALOG. A comprehensive collection of performance objectives, performance guides, and related data developed in a specific domain.

COMPETENCY-BASED EDUCATION. Educational program in which students are given specific requirements for individual performances which must be met in order to advance in instruction.

CONDITIONS. Description of the situation, including tools and equipment to be used, and limitations under which the tasks will be performed.

CONSORTIUM. A group of state agencies, institutions, or other entities which have been legally constituted through letters of commitment, agreements, or by assignment of higher authorities to work together toward the solution of problems in education. A consortium, for the purposes of this work, must have membership from autonomous agencies and institutions which have cut across state boundaries as they attempt to solve problems or meet goals.

CROSS-REFERENCE TABLE. A table that identifies the relationship among duties and tasks found in the occupational inventory and the performance objectives in the final catalog. Also noted are percentages of incumbents performing the tasks by D.O.T. number.

DICTIONARY OF OCCUPATIONAL TITLES (D.O.T.). A document published by the U.S. Department of Labor, Employment, and Training Administration. This publication groups occupations into systematic occupational classification structures based on interrelationships of job tasks and requirements.

DOMAIN (Occupational Domain). A group of job titles that are related on the basis of required skills and knowledge. D.O.T. CODE. A nine-digit number used to identify a specific job within a given cluster.

D.O.T CODE. A nine-digit number identifying a specific occupation, taken from the Dictionary of Occupational Titles developed by the U.S. Department of Labor.

DUTY. A cluster of related tasks performed by incumbent workers in an occupational domain.

DYADIC INTERACTION. The skill and performance in relating to another person.

ENERGY CONSERVATION. The skill and performance in applying energy-saving procedures, activity restriction, work simplification, time management, and/or organization of the environment to minimize energy output.

EVALUATION. The gathering and interpretation of data necessary for treatment planning.

FUNCTIONAL COMMUNICATION. The skill and performance in using equipment or systems to enhance or provide communication, such as writing equipment, typewriters, letterboards, telephone, braille writers, artificial vocalization systems and computers.

FUNCTIONAL MOBILITY. The skill and performance in moving oneself from one position or place to another.

IN-SERVICE EDUCATION. The participation of regularly employed occupational therapy personnel in regularly scheduled classes, in-house seminars, and special training sessions, either in or outside the facility.

JOINT PROTECTION. The skill and performance in applying principles or procedures to minimize stress on joints.

OCCUPATIONAL ANALYSIS (Task Analysis). The process of reviewing elements of a job for the purpose of improving training program content across program levels of vocational-technical education.

OCCUPATIONAL INVENTORY (Task Inventory Booklet). A survey instrument listing tasks performed and tools and equipment used by job incumbents in an occupational domain.

OCCUPATIONAL SURVEY. The procedures for collecting data to identify the duties and tasks that comprise one or more jobs, job types, or career field ladders for the collection and analysis of information concerning such duties.

O.E./CIP CODE. A code developed by the U.S. Office of Education to identify a specific cluster of related jobs for training program identification.

ORTHOTICS. The provision of dynamic and static splints, braces, and slings, for the purpose of relieving pain, maintaining joint alignment, protecting joint integrity, improving function, and/or decreasing deformity.

PERFORMANCE-BASED INSTRUCTION. Instruction which requires the learner's demonstration of specific competencies. The desired abilities are selected before the instruction is described and are clearly defined as observable performance objectives.

PERFORMANCE GUIDE (PG). A series of steps required for performance of a task arranged in the sequence ordinarily followed.

PERFORMANCE OBJECTIVE (PO). A statement, in precise measurable terms, of a particular behavior to be exhibited by a learner under specified conditions, including a standard of performance.

PLAY/LEISURE. The skill and performance in choosing, performing, and engaging in activities for amusement, relaxation, spontaneous enjoyment, and/or self-expression.

POSITIONING. The skill and performance in the placement of a body part in alignment to promote optimal functioning.

PROSTHETICS. The training in use of artificial substitutes of missing body parts, which augment performance of function.

PURPOSEFUL ACTIVITY. An activity as used by the occupational therapist includes both an intrinsic and a therapeutic purpose.

REALITY ORIENTATION. The skill and performance in comprehending, defining and adjusting oneself in an environment with regard to time, place, and person.

SCREENING. Identification of children who need help without interfering in the lives of those who have only a mild and temporary developmental delay.

SIGNIFICANT OTHERS. Persons, excluding the individual's family and health professionals, who have an important relationship to the individual.

STATE-OF-THE-ART (SOA) STUDY. Research conducted to determine the current status of performance-based instructional materials and practices in the domain area under study and to obtain other information that might be useful in catalog development.

SUPPORT PERSON CARE TAKER. People, agencies, or institutions that serve to help sustain a person in stress or problems.

TASK. A unit of work activity which constitutes logical and necessary steps in the performance of a duty. A task has a definite beginning and ending point in its accomplishments and generally consists of two or more definite steps.

TASK ANALYSIS. The process of reviewing elements of a job for the purpose of improving training program content across program levels of vocational technical education.

TASK CRITICALITY. That aspect of a task statement which makes its accomplishment crucial to the acceptable performance of a worker or student.

WORK. The skill and performance in participating in socially purposeful and productive activities. These activities may take place in the home, employment setting, school, or community.

V-TECS CATALOG DESCRIPTION

This V-TECS catalog was developed for the following domain area.

CIP CODES: 17.0807 Occupational Therapy
17.0808 Occupational Therapy Aide
17.0809 Occupational Therapy Assisting

DOT CODES: 076.364-010 Occupational Therapy Assistant
355.377-010 Occupational Therapy Aide

The major portion of the catalog contains an analysis of the domain area as graphically shown in Figure 1.

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 21

TASK: Compile departmental data.

STANDARD OF PERFORMANCE OF TASK:

The required information must be legible, accurate and recorded on a timely basis.

CONDITIONS FOR PERFORMANCE OF TASK:

Department data sheets

PERFORMANCE GUIDE:

1. Identify data sheets requiring updating:
    - A. Attendance.
    - B. Time sheets.
    - C. Telephone calls.
    - D. Equipment issue.
    - E. Splint issue/follow-up.
    - F. Travel records.
    - G. Employee records.
    - H. Continuing education points.
    - I. Educational tracking forms.
    - J. Quality assurance.
2. Enter information as required.
3. File data sheet according to department procedures.

SOURCE OF STANDARD:

Writing team of incumbent workers

When using the information from a respective catalog page, as represented in Figure 1, the following should be noted:

1. Duties are defined as a major segment of work-related activities for the domain area Occupational Therapy Occupations. Duties are comprised of related tasks.
2. Tasks are discrete units of work-related activities that constitute logical and necessary activities in the performance of a duty. A task has definite beginning and ending points for accomplishment and generally consists of two or more definite steps for completion.
3. Duties and tasks are not necessarily in a sequential order. However, tasks within a duty were written to be highly-related to the respective duty.
4. Performance guides are a series of steps arranged in a sequence that when followed would result in the performance and completion of a stated task. It should be noted that the performance guide steps used in a V-TECS catalog may not be the only sequential steps that could be followed to perform the tasks. V-TECS attempts to identify the steps most commonly used.

5. Performance objectives are separated into tasks, performance standards, and the conditions for performance (such as equipment, tools, supplies, and implements) required to complete the task (action required) as well as a standard (criterion) of occupational-related requirements for acceptable completion of the task.

This catalog Occupational Therapy Occupations defines the population as persons who are employed on a full-time basis to perform duties and tasks in one or more of the five specified job titles in Illinois. Two hundred and two randomly selected medical institutions were identified. These medical institutions employed Occupational Therapist Assistants and Occupational Therapy Aides in the Occupational Therapist Occupations field. The survey instrument consisted of 8 duties, 208 tasks, and a listing of 605 tools, equipment, and work aids, all based upon a state-of-the-art review of the domain area and interviews with 22 incumbents. Data were processed on 125 respondents; data were analyzed and task synthesized by a writing team consisting of Terri Anderson, Occupational Therapy Assistant, Joan Juul, Occupational Therapy Assistant, Mariline Joiner, Occupational Therapy Assistant, David Vice, Occupational Therapy Aide, Bev Loester, Occupational Therapy Aide, Karen St. John, Registered

Occupational Therapist, Janis L. Maloney, Registered Occupational Therapist, Cindy Siddens, Registered Occupational Therapist and four project staff members, Fred Reneau, project director, Dave Hahn, project researcher, Joe Mathews, project researcher and Peggy Pool, state technical coordinator.

A draft catalog reviewed by Susan Martin, Occupational Therapy Assistant, Cindy Schoenbeck, Occupational Therapy Assistant, Donna Hudson, Occupational Therapy Assistant, Elizabeth Harmening, Occupational Therapy Assistant, Sister Mary Marjorie Mersimer, Occupational Therapy Assistant, Bolaji M. Aregbesola, Occupational Therapy Aide, Eileen Willack, Occupational Therapy Aide, Virginia Larsen, Occupational Therapy Aide, Lois Hilfrich, Occupation Therapy Aide, Jo Ann Otto OTR/L, Senior Rehabilitation Specialist.

In addition to the performance objectives and performance guides section, the catalog also contains the following:

1. Appendix A-page 292, a listing by percent use of those tools, equipment, and work aids used by incumbent workers in the occupation.
2. Appendix B-page 300, a bibliography of all sources of standards cited in the catalog.

3. Appendix C-page 302, a cross-reference table listing the duty areas and task statement as they appeared in the survey instrument (occupational inventory); the disposition of duty areas and task statements within this catalog; and the results of the incumbent worker survey responses by number and percent performing.
4. Appendix D-page 313, a bibliography of state-of-the-art literature identified during catalog development.
5. Appendix E-page 320, a graphic representation of the V-TECS catalog development model.

V-TECS Catalog Uses

The intent of this V-TECS catalog is to provide an incumbent worker based description of duties, tasks, performance objectives, performance guides, and related data in the domain area Occupational Therapy Occupations. This catalog was not compiled for a specific audience, such as instruction materials developers, curriculum developers, educators, researchers, business or professional or industrial applications, or evaluations. However, due to the nature of the catalog, all the above users and many others have a ready made incumbent worker research-based document to provide information for their specific needs.

The following are given as examples of catalog implementation. Generically, as an incumbent-based document, the V-TECS catalog within a specified domain area can be applied in the areas of accountability, budget, articulation, resource identification, needs assessment, competency (performance) based instruction, counseling, individualized instruction, program profits, program/student evaluation, and student placement/progression. It must be noted that the V-TECS catalog serves as a resource document for all of the above uses and as such cannot be directly absorbed or adopted to a single specified use.

Specifically, components of the catalog can be used as follows:

Duty Areas. The duty areas are distinct major activities engaged in by incumbent workers. Duties can be used as: (1) a functional basis for instructional programs, (2) a basis for assessment (placement and progression), and (3) a basis for developing objectives.

Tasks. Duties are constituted by grouping highly related work activities called tasks. Tasks can be used as: (1) a functional organization for instructional increments within duties, (2) a basis for instructional assessment (placement and performance), and (3) a basis for planning individualized instruction. Additionally, tasks can serve as part of a basis to certify completers of a program of placement of individuals within a domain area.

Performance Guides. Observable steps in a sequence leading to the accomplishment of a task make up a performance guide. As such, performance guides can serve in: (1) establishing enabling instructional objectives, (2) curriculum/instructional materials design, and (3) establishing enabling standards.

Performance Objectives. Performance objectives are listed as tasks in performance terminology, conditions that describe the action, conditions for performance, and standards of acceptable performances that lead to the successful completion of a task. As such, performance objectives can be used: (1) to establish objectives for instruction/placement; (2) as a comparison to the existing setting for updating, revising, or concurrence; (3) to establish the basis for competency/performance-based efforts; (4) in needs assessment; and (5) in goal setting.

PERFORMANCE OBJECTIVES

AND

PERFORMANCE GUIDES

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 1

TASK: File patient's records.

STANDARD OF PERFORMANCE OF TASK:

Selection of materials to be placed in the patient's file and organization of materials within the patient's file must be done according to department guidelines. Pertinent documents including evaluation data, treatment plan, progress notes, and/or discontinuation note must be added to the patient's file.

CONDITIONS FOR PERFORMANCE OF TASK:

Files
Test scores
Charge slip
Consent form
Filing system
Home programs
School records
Patient's records
Medical information
Developmental history
Physician's prescription
Equipment issue/order form
Department filing regulations
Letters to/from patient/support persons/practitioners

PERFORMANCE GUIDE:

1. Remove patient's file.
   NOTE: Follow department guidelines for documenting the removal of the file (i.e., mark sign-out sheet).
2. Identify patient documents by patient's:
   A. Name.
   B. Date of birth.
   C. Identification number.

PERFORMANCE GUIDE: (cont.)

3. Check patient documents for appropriateness of inclusion in patient's file.
   NOTE: Some records may not be added to patient's file without notification of other practitioners.
4. Notify supervisor of materials that are not to be included in patient's files.
5. Insert documents that are to become a permanent part of the patient's records into the patient's file.
   NOTE: Patient records must document information needed for best possible patient care.
6. Return patient's file.
   NOTE: Follow department guidelines for documenting the return of the file (i.e., mark sign-out sheet).

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 2

TASK: Review departmental mail.

STANDARD OF PERFORMANCE OF TASK:

Contents of mail must be categorized, marked with department name and date received, and forwarded to department staff members. Staff must be notified of complaints, policy changes, or other pertinent information. Improperly delivered mail must be returned unopened.

CONDITIONS FOR PERFORMANCE OF TASK:

Date stamp
Mail service
Incoming mail
Letter opener
Department stamp
Department mail boxes
Department correspondence regulations

PERFORMANCE GUIDE:

1. Identify mail that was delivered improperly.
2. Forward improperly delivered mail to mail service.
3. Open each of the remaining parcels.
4. Identify nature of the correspondence:
    - A. Vendor promotion.
    - B. Personal correspondence.
    - C. Complaint.
    - D. Legal notice.
    - E. Request for service.
    - F. Other.
5. Notify administration of situations that require further action on the part of the department administrator.
6. Mark correspondence with department name and date received.

PERFORMANCE GUIDE: (cont.)

7. File a copy of the correspondence, if needed.
8. Forward correspondence to department staff members.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 3

TASK: Plan meeting.

STANDARD OF PERFORMANCE OF TASK:

The planned meeting time and location must be set, the room and equipment must be reserved, and the meeting's objectives and participants must be identified. Participants must receive a copy of the agenda and have their attendance intentions confirmed.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Duplication machine
Meeting room/equipment reservation systems

PERFORMANCE GUIDE:

1. Formulate meeting objectives.
2. Select meeting participants.
3. Select meeting time/location:
   A. Select tentative time and location.
   B. Ask participants if tentative time/location is convenient.
   C. Set meeting time and location.
4. Reserve meeting room.
   NOTE: Collect additional information at this time (i.e., location of bathrooms, parking).
5. Reserve equipment for meeting.
6. Arrange for refreshments.
7. Prepare meeting agenda:
   A. Location.
   B. Starting time.
   C. Schedule.
   D. Participants.
8. Duplicate agenda.

PERFORMANCE GUIDE (cont.)

9. Distribute agenda.
   NOTE: Include additional information (i.e., map, directions, list of hotels, restaurants).
10. Confirm that participants have received agenda and plan to attend.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 4

TASK: Participate in interdisciplinary care plan meeting or staffing.

STANDARD OF PERFORMANCE OF TASK:

Work schedules must be adjusted to allow attendance, information to be presented must be organized prior to arrival at meeting and arrival at meeting must be on time. Information obtained must be organized, and information shared must be accurate.

CONDITIONS FOR PERFORMANCE OF TASK:

Calendar
Note pad
Work schedule
Patient's records
Patient's treatment plan

PERFORMANCE GUIDE:

1. Check calendar for meeting date, time and location.
2. Check work schedule for conflicts with meeting schedule.
3. Assemble materials and make notes of information to be presented at the meeting.
4. Arrive at meeting place prior to scheduled meeting time.
5. Collect or present information:
   NOTE: Ask questions as needed to clarify information.
   A. Evaluation results.
   B. Treatment plan (occupational therapy or related services).
   C. Specific activities for patient.
   D. Staff responsibilities.
   E. Changes in patient's condition.
6. Report collected information to concerned parties.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 5

TASK: Complete charge slip form.

STANDARD OF PERFORMANCE OF TASK:

Patient's charge information must be transferred to charge slip, including patient's name, address, social security number, date of birth, telephone number, physician's name and assistant's/aide's signature or initials as required by the department guidelines. All treatments received must be marked clearly and legibly on the charge slip.

CONDITIONS FOR PERFORMANCE OF TASK:

Charge slip form
Patient's records
Embossing machine
Patient charge card
Department guidelines
Patient's treatment card

PERFORMANCE GUIDE:

1. Mark charge slip with patient information:
   A. Manually (by hand).
   B. Embossing machine:
      (1) Place patient's charge card in embossing machine.
      (2) Position charge slip form in embossing machine.
      (3) Operate embossing machine.
      (4) Remove charge slip form.
      (5) Return charge card to storage area or to patient.
2. Verify that all patient information appears on charge slip:
   A. Name.
   B. Address.
   C. Social security number.
   D. Date of birth.
   E. Telephone number.
   F. Physician's name.

PERFORMANCE GUIDE (cont.)

3. Mark treatments received on charge slip form.
4. Sign or initial charge slip form.
5. File and/or distribute copies of the charge slip as per department procedures.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 6

TASK: Complete travel reimbursement form.

STANDARD OF PERFORMANCE OF TASK:

The travel reimbursement form must document the time and date of travel, beginning point, destination, mileage, and purpose of travel and must contain supportive documentation. Mileage figures must be calculated and the form must be signed, dated and forwarded to the administrative staff on or before the due date.

CONDITIONS FOR PERFORMANCE OF TASK:

Calendar
Calculator
Reimbursement form
Travel records/documentation
List of predetermined distances

PERFORMANCE GUIDE:

1. Identify period of time for which reimbursement form is to be completed:
   - A. Daily.
   - B. Weekly.
   - C. Monthly.
   - D. Not specified.
2. Complete form (handwritten or typed):
   - A. Date of travel.
   - B. Starting point and destination.
   - C. Miles traveled.
   - D. Other expenses.
     NOTE: Mileage to commonly visited locations may have been predetermined by agency administration.
3. Calculate totals.
4. Attach required receipts or other supportive documents.
   NOTE: Supportive documents should be copied prior to release of original.
5. Sign and date the form.
6. Secure signatures of administrators.

PERFORMANCE GUIDE: (cont.)

7. File a copy of the supportive documents and the completed form.
8. Forward completed forms and supportive documents to administrative staff.
   NOTE: Completion of mileage reimbursement form on or before due date will insure speedy reimbursement.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 7

TASK: Schedule patient's appointment.

STANDARD OF PERFORMANCE OF TASK:

Appointment scheduling information must include patient's name, reason for appointment, time, date, and location of appointment. The treatment must be scheduled at a time convenient to the patient and must not conflict with other treatments scheduled. Equipment, facilities an the personnel required to perform the therapy must be available at the scheduled time.

CONDITIONS FOR PERFORMANCE OF TASK:

Calendar
Telephone
Mail service
Support person
Appointment cards
Patient's records
Appointment schedule

PERFORMANCE GUIDE:

1. Identify the time and date that facilitates the patient's attendance:
    - A. In-patient:
        - (1) Consider appointments with other patient services.
        - (2) Consider patient's daily routine.
    - B. Outpatient:
        - **NOTE:** Outpatient may require information regarding directions for reaching the facility.
        - (1) Consider patient's daily routine/work schedule.
        - (2) Consider travel time and transportation needs.
        - (3) Consider appointments with other patient services at same location.

PERFORMANCE GUIDE: (cont.)

C. In-school visits:
  (1) Consider class schedule.
  (2) Consider schedules of other patients at same location.
  (3) Consider travel time.
  (4) Consider school holidays and vacations.
  (5) Consider availability of room for treatment.
  (6) Consider other related services providing treatment/requiring room for treatment.
  (7) Consider weather for outdoor activities.

D. In-home visits:
  NOTE: Obtain directions for reaching the patient's home.
  (1) Consider patient's daily routine.
  (2) Consider other in-home services utilized by the patient.
  (3) Consider availability of facilities within the home (i.e., kitchen, bathroom).
  (4) Consider travel time.

2. Review staffing patterns and availability of equipment and facilities.
3. Identify an alternative time and date if conflicts exist.
4. Review details of appointment with patient/support person:
   A. Patient's full name.
   B. Reason for appointment.
   C. Date of therapy session.
   D. Time of therapy session.
   E. Location of therapy session.
   F. Review patient's instructions unique to the scheduled appointment (i.e., bring clothes for dressing skills, bring splints).
5. Provide patient/support person with a completed appointment card.
6. Document and report appointment.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 8

TASK: Schedule space and equipment for therapy.

STANDARD OF PERFORMANCE OF TASK:

The scheduled area must provide required supplies, equipment and environment for the therapy. The scheduled use of the area/equipment must be recorded in the scheduling log and must not conflict with previously scheduled use of the treatment area/equipment.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Scheduling log
Patient's records

PERFORMANCE GUIDE:

1. Review scheduling log to identify which patients have appointments.
2. Review each patient's records to identify the requirements of the scheduled therapy.
3. Identify suitable area/equipment for therapy.
4. Verify availability of the area/equipment:
   NOTE: If suitable area/equipment is unavailable, arrangements may be made to make the area/equipment available.
   A. In-school.
      NOTE: Arrangements may be made in advance, after arrival at the site, or an area that has been used in the past may be used without special arrangements.
   B. In-home.
      NOTE: If information regarding the suitability of the home environment is lacking, a visit prior to the therapy session may be warranted.

PERFORMANCE GUIDE: (cont.)

C. Work-site.
NOTE: Business owner/manager must be kept informed and may be a source of information.

D. Within department facilities.
NOTE: Consider activities planned by other staff.

5. Record time and date that the area/equipment will be used on scheduling log.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 9

TASK: Develop master therapy schedule.

STANDARD OF PERFORMANCE OF TASK:

Appointment scheduling information must include patient's name, reason for appointment, time, date, and location of appointment. The appointment must be scheduled at a time convenient to the patient and must not conflict with other treatments scheduled. Equipment, facilities and the personnel required to perform the therapy must be available at the scheduled time.

CONDITIONS FOR PERFORMANCE OF TASK:

Calendar
Staff work schedules
Department scheduling form
List of appointments previously scheduled
Patient's work/school/daily routine schedules
List of patients for which appointments must be scheduled
Map or list of travel time to remote sites (i.e., schools, patients' homes)

PERFORMANCE GUIDE:

1. Identify times/dates when occupational therapy staff are available.
2. Identify times/dates when treatment area/equipment are available.
3. Identify patients who require appointments with a specific staff member.
4. Identify patients who participate in occupational therapy as a group.
5. Identify remote locations which are near each other.
6. Select a staff member, a time and a date for each patient:
   NOTE: The suggested procedure is to start with scheduling of those patients whose time is least flexible.

PERFORMANCE GUIDE (cont.)

NOTE: Reschedule previously scheduled appointments.

A. In-patient:
   (1) Consider appointments with other patient services.
   (2) Consider patient's daily routine.

B. Out-patient:
   (1) Consider patient's daily routine.
   (2) Consider work schedule.
   (3) Consider transportation needs.
   (4) Consider travel time.
   (5) Consider appointments with other patient services at same location.

C. In-school visits:
   (1) Consider class schedule.
   (2) Consider schedules of other patients at same location.
   (3) Consider travel time.
   (4) Consider school holiday and vacation.
   (5) Consider availability of room for treatment.
   (6) Consider other related services providing treatment.
   (7) Consider weather for outdoor activities.

D. In-home visits:
   NOTE: Include directions for reaching the patient's home.
   (1) Consider patient's daily routine.
   (2) Consider other in-home services utilized by the patient.
   (3) Consider availability of facilities within the home (i.e., kitchen, bathroom).
   (4) Consider travel time.

7. Schedule use of equipment/treatment area.
8. Discuss scheduled appointments with staff members.
9. Post master schedule.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 10

TASK: Maintain attendance records.

STANDARD OF PERFORMANCE OF TASK:

Appointments in scheduling log must be marked as attended or missed. The reasons given for nonattendance must be recorded. Trends in nonattendance by a patient must be reported.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Therapy scheduling log
Patient/support person
Telephone
Mail service

PERFORMANCE GUIDE:

1. Review scheduling log.
2. Mark each appointment in scheduling log as attended or missed.
   NOTE: Follow department procedures for format and use of abbreviations.
3. Identify reasons appointments were missed:
   A. Contact nurse's station for in-patient.
   B. Contact referring physician, patient, or support person for out-patients.
   C. Contact teacher or school staff for in-school visits.
      NOTE: Patient that has missed regularly scheduled weekly or daily sessions may require scheduling adjustments if conflicts continue.
4. Record reason for nonattendance in scheduling log and in patient's records.
   NOTE: Reason for nonattendance given by patient/support person may not be accurate.

PERFORMANCE GUIDE (cont.)

5. Report patient for whom nonattendance has become a problem.
   NOTE: The patient's history of responsibility and the importance of the therapy sessions will be factors in determining when nonattendance has become a problem.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 11

TASK: Supervise assistants, aides and volunteers.

STANDARD OF PERFORMANCE OF TASK:

The subordinate must be advised to avoid performing tasks for which they have not been approved by the chief occupational therapist or administrator. The subordinate must be observed performing assigned tasks from their daily work assignments,and provided with safety information, skills training, and motivational feedback. The subordinate's performance must be critiqued according to established department standards.

CONDITIONS FOR PERFORMANCE OF TASK:

Work schedule
Department evaluation form
Aide or volunteer (performing tasks)
Department standards for performing treatment

PERFORMANCE GUIDE:

1. Review written work schedule with subordinate.
2. Discuss work assignments with subordinate.
3. Observe subordinate performing assigned tasks.
4. Inspect subordinate's product (i.e., completed form, equipment made/repaired).
5. Critique the subordinate's performance:
   NOTE: Use a department evaluation form if available.
   A. Follows instructions.
   B. Follows standard occupational therapy practices.
   C. Selects and uses correct tools, equipment, and materials.
   D. Communicates with patients in a polite and professional manner.
   E. Observes patient's rights.
   F. Observes safety procedures.
   G. Cleans work area.
   H. Completes tasks on time.
   I. Notes patient's conditions/progress.

PERFORMANCE GUIDE: (cont.)

6. Discuss with subordinate:
    - A. Ways performance can be improved.
    - B. Tasks that are being performed well.
    - C. Personal goals and ways they might be achieved.

SOURCE OF STANDARD:

Writing team of incumbent workers
The occupational therapy manager

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 12

TASK: Train occupational therapy assistants, aides, volunteers and support persons.

STANDARD OF PERFORMANCE OF TASK:

The training plan must schedule specific training activities which will increase the trainee's competence in the tasks for which they were hired or for which they volunteered. The training activities must be carried out in such a manner that trainee's success is maximized.

CONDITIONS FOR PERFORMANCE OF TASK:

Job description
Training materials
Formal instruction
Reference materials
Department standards for treatment
Other occupational therapy facilities
Occupational therapy assistants, aides, or volunteers

PERFORMANCE GUIDE:

1. Identify tasks the individual must master to be competent.
2. Develop training plan:
   - A. List tasks that the individual needs to master.
   - B. List person to provide training.
   - C. List when training will occur.
   - D. List date by which proficiency in task should be obtained.
3. Demonstrate the task:
   NOTE: The trainee's level of motivation should be monitored and reinforcement provided.
   - A. Collect training materials.
   - B. Explain objectives, methods, and safety precautions.
   - C. Perform the task:
     - (1) Explain each step as task is performed.

PERFORMANCE GUIDE: (cont.)

            (2) Encourage questions.
            NOTE: Procedures for patient safety must be understood before trainee attempts to perform the task.
        D. Observe trainee's performance of the task.
        E. Ask questions to evaluate comprehension of instructions.
        F. Critique performance indicating satisfactory or unsatisfactory aspects of the performance.
        G. Repeat demonstration if necessary.
        H. Supervise the trainee until skill is mastered.

4. Recommend reference materials:
    A. Specialized textbooks.
    B. Professional journals.
5. Plan visits to other occupational therapy facilities.
6. Receive formal instruction:
    A. Meetings of professional organizations.
    B. Seminars.
    C. Workshops.
    D. Courses.
    E. Tours.
7. Record a summary of the trainee's performance in the training plan.
8. Alter training plan when remediation is required.

SOURCE OF STANDARD:

Writing team of incumbent workers
The occupational therapy manager

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 13

TASK: Assist with a student's clinical experience.

STANDARD OF PERFORMANCE OF TASK:

Information provided to the student must be based on standard department procedures. Documentation of student's clinical experience must be accurate.

CONDITIONS FOR PERFORMANCE OF TASK:

Student
Clinical setting
Clinical supervisor
OTR/field supervisor
Department standards for treatment
Written agreement/guidelines

PERFORMANCE GUIDE:

1. Discuss with the chief occupational therapist the clinical supervisor's role in the student's clinical experience.
2. Assist in providing information to the student:
   A. Explain the student's role within the facility.
   B. Explain regulations.
   C. Explain objectives of procedures.
   D. Demonstrate procedures.
3. Supervise a student who is providing therapy:
   A. Ensure student has adequate abilities to perform the task.
   NOTE: If you are unsure of the student's abilities, check with the chief occupational therapist prior to allowing the student to perform the task.
   CAUTION: Procedures for patient safety must be understood by the student prior to allowing the student to perform the task.
   B. Observe student.
   C. Assist student.
   D. Provide feedback on student's performance.

PERFORMANCE GUIDE (cont.)

4. Assist with documentation of student's clinical experience:
    - A. Attendance.
    - B. Tasks performed.
    - C. Special assignments.
    - D. Evaluation forms.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 14

TASK: Develop facility's guidelines of quality treatment.

STANDARD OF PERFORMANCE OF TASK:

The guidelines must list at least one treatment approach for each diagnosis for which the department accepts referrals. Specific modalities and activities must be defined in written form, and The modalities and activities must be referred to by a standard name or described such that misinterpretations are avoided. The guidelines for quality treatment must be accepted by the chief occupational therapist, administrator or review committee.

CONDITIONS FOR PERFORMANCE OF TASK:

Department records
Workshops and in-services
Occupational therapy books
Occupational therapy staff
Occupational therapy catalogs
Occupational therapy journals
Occupational therapy consultants
Guidelines from other facilities
Professional organization guidelines
Department goal or mission statements
Department, equipment, facilities and supplies

PERFORMANCE GUIDE:

1. Collect resource materials:
   A. Occupational therapy books.
   B. Occupational therapy journals.
   C. Guidelines from other facilities, agencies or professional organizations.
2. Review department goal or mission statements.
   NOTE: Goal or mission statements may be understood but unwritten.
3. List diagnoses for which treatment is provided:
   A. Refer to department records.
   B. Question department staff.

PERFORMANCE GUIDE: (cont.)

4. List the treatment approaches used in the occupational therapy department for each of the listed diagnoses:
    A. Refer to patient records.
    B. Look at department equipment, facilities and supplies.
5. List treatment approaches that could be used but are not standard department procedures.
    NOTE: When nonstandard procedures are listed, the source of the information must be cited.
6. List modalities and activities which could be performed as part of the listed treatment approaches:
    A. Look at department equipment, facilities and supplies.
    B. Review occupational therapy books and journals.
    C. Review guidelines for quality treatment developed at other facilities.
    D. Question department staff.
    E. Question occupational therapy consultants.
    F. Attend workshops and in-services.
7. Organize lists of modalities and activities.
    NOTE: Because the number of possible activities is great, those activities which are applicable to a greater percentage of patients' interests and needs must be given preference.
    NOTE: Activities which help patients achieve multiple goals must be given preference.
8. Question supervisors on appropriateness of treatment approaches, modalities and activities.
9. Finalize lists.
    NOTE: Clerical staff may be helpful in producing draft/final copy.
10. Submit draft guidelines.
11. Edit draft guidelines considering review comments and submit final guidelines.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 15

TASK: Update facility's guidelines of quality treatment.

STANDARD OF PERFORMANCE OF TASK:

The updated guidelines must contain at least one treatment approach for every diagnosis for which the department accepts referrals. Specific modalities and activities must be further defined in written form for each treatment approach. The modalities and activities must be referred to by a standard name or described so that misinterpretations are avoided. The additions to and/or deletions from the guidelines for quality treatment must be accepted by the chief occupational therapist, administrator or review committee.

CONDITIONS FOR PERFORMANCE OF TASK:

Workshops and in-services
Occupational therapy books
Occupational therapy staff
Occupational therapy catalogs
Occupational therapy journals
Occupational therapy consultants
Professional organization guidelines
Department guidelines for quality treatment
Department, equipment, facilities and supplies

PERFORMANCE GUIDE:

1. Identify reasons why the department's guidelines for quality treatment must be updated:
   A. Newly developed methodology.
   B. Expanded services offered by the department.
   C. Changes in staffing structure within department.
   D. Acquisition of new equipment.
2. Collect information.
3. List proposed changes/additions in the department's guidelines for quality treatment.

PERFORMANCE GUIDE: (cont.)

4. Discuss the proposed changes/additions with the department supervisor.
5. Edit guidelines for quality treatment.
6. Submit updated guidelines of quality treatment.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 16

TASK: Collect information for quality assurance measures.

STANDARD OF PERFORMANCE OF TASK:

All occupational therapy procedures and treatments must be counted and summarized on a daily and monthly information sheet, including a daily summary sheet, attendance records and patient charge slips.

CONDITIONS FOR PERFORMANCE OF TASK:

Daily summary sheet
Quality assurance files
Attendance records
Patient charge slips
Calculator
Quality assurance forms

PERFORMANCE GUIDE:

1. Collect and organize:
   A. Daily summary sheets for the month.
   B. Patient attendance records.
   C. Patient charge slips.
   D. Quality assurance forms.
2. Calculate the number of occupational therapy treatments given:
   A. List number of treatments for each day.
   B. Total number of treatments for the month.
3. Check information for accuracy.
4. Transfer information to quality assurance forms.
5. Copy completed form.
6. File one copy of the form in the quality assurance file.
7. Forward one copy of the form to quality assurance personnel.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 17

TASK: Develop facility's preprinted home program.

STANDARD OF PERFORMANCE OF TASK:

The preprinted home program must contain the information required for performance of the modality/activity by the patient or support person with a minimal amount of clarification by the occupational therapy staff at the time of implementation. The preprinted home program must be accepted by the chief occupational therapist or administrator.

CONDITIONS FOR PERFORMANCE OF TASK:

Department records
Workshops/in-services
Duplicating equipment
Occupational therapy books
Occupational therapy staff
Occupational therapy journals
Occupational therapy consultants
Guidelines for quality treatment
Computer and specialized software

PERFORMANCE GUIDE:

1. List diagnoses for which home programs are applicable.
   NOTE: Consult department guidelines for quality treatment.
2. Organize list of diagnoses:
   A. Diagnoses commonly treated in facility should be given priority.
   B. Diagnoses for which similar activities can be used should be grouped.
3. Identify modalities/activities which can be used in treatment of each diagnosis.
   CAUTION: List only those modalities/activities which you can reasonably expect a patient to perform at home and will not compromise the patient's safety.

PERFORMANCE GUIDE (cont.)

   A. Consult department guidelines for quality treatment.
   B. Consult with occupational therapy staff and consultants.
   C. Consult occupational journals and books.
   D. Consult department records.
4. Review list of modalities/activities with chief occupational therapist or administrator:
   A. Verify purpose of each modality/activity.
   B. Explain how instruction for carrying out each modality/activity will be conveyed in printed form.
   C. Secure approval for further development of preprinted instructions for each modality/activity.
5. Develop instructions for each modality/activity:
   A. List equipment/supplies needed.
   B. Write, print or type instructions.
   C. Diagram or draw positions, movements, equipment or supplies.
   D. Photocopy information from resource materials.
   CAUTION: Copyright laws may be applicable.
6. Submit draft instructions for review by other staff.
7. Edit draft instruction as per comments from other staff.
8. Pilot-test instruction:
   A. Identify a person with limited knowledge of the procedures for the modality/activity.
   B. Review the instructions that would be given to a patient during implementation of the home program.
   C. Evaluate the comprehension of the instructions.
   NOTE: Asking for a demonstration of modality/activity can be done to evaluate comprehension.
9. Edit instructions as per pilot-test results.
10. Attach cover page with:
    A. Facility and/or department name/logo.
    B. Blank lines for patient's name, date of implementation, assistant's/aide's name.
11. Submit preprinted home program for approval by chief occupational therapist or administrator.

PERFORMANCE GUIDE (cont.)

12. Copy and file the approved preprinted home program.
13. Schedule date and time for in-service of occupational therapy staff regarding the use of the preprinted home program.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 18

TASK: Update facility's preprinted home program.

STANDARD OF PERFORMANCE OF TASK:

Changes in the preprinted home program must reflect changes in the profession. The additions to and/or deletions from the preprinted home program must be approved by the chief occupational therapist or administrator.

CONDITIONS FOR PERFORMANCE OF TASK:

Department records
Workshops/in-services
Duplicating equipment
Occupational therapy books
Occupational therapy staff
Occupational therapy journals
Computer and specialized software
Occupational therapy consultants
Guidelines for quality treatment

PERFORMANCE GUIDE:

1. Identify reasons why the department's preprinted home programs must be updated:
   A. Newly developed methodology.
   B. Expanded services offered by the department.
2. Collect information.
3. List proposed changes/additions in the department's preprinted home programs.
4. Discuss the proposed changes/additions with the department supervisor.
5. Edit preprinted home programs.
   NOTE: Clerical staff may be helpful in producing draft/final copy.
6. Submit edited preprinted home programs for approval by chief occupational therapist or administrator.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 19

TASK: Maintain occupational therapy resource library.

STANDARD OF PERFORMANCE OF TASK:

Department resource library deficiencies must be identified and corrected on a timely basis with minimum expenditures. These expenditures including newly offered resource materials, continuations of subscriptions and updated editions.

CONDITIONS FOR PERFORMANCE OF TASK:

Medical publishers catalogs
Occupational therapy professional journals
Occupational therapy newsletters
Occupational therapy in-services and workshops
Occupational therapy professional organization meetings

PERFORMANCE GUIDE:

1. Organize current contents of occupational therapy resource library:
   A. Secure materials that were loaned out and not returned.
   B. Sort materials by subject.
   C. Remove materials that do not apply to the occupational therapy department.
   D. Remove materials that are outdated or ineffective.
2. Identify subjects for which deficiencies in the resource library exist.
3. Identify specific publications that can overcome deficiencies in the resource library:
   A. Question other occupational therapy agencies.
   B. Make inquiry to professional organization.
   C. Review medical publisher's catalogs.
4. Review professional journals, newsletters and medical publishers' catalogs for newly offered resource materials or new editions of previously offered titles.
5. Submit to supervisor a list of materials to be acquired.

PERFORMANCE GUIDE (cont.)

6. Identify sources of materials and funding sources:
    - A. Purchased with department funds.
    - B. Purchased with personal funds.
    - C. Borrowed from library.
    - D. Borrowed from other occupational therapy professionals.
      NOTE: Returning borrowed materials on or before due date helps assure continuation of borrowing privileges.
7. Collect resource materials as a part of workshops, in-services and professional organization meetings or conferences.
8. Subscribe to professional journals/newsletters.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 20

TASK: Collect information for budget preparation.

STANDARD OF PERFORMANCE OF TASK:

Information must be accurate, complete and reported in the assigned format on or before the due date.

CONDITIONS FOR PERFORMANCE OF TASK:

Department records
Occupational therapy equipment/supply catalogs
Equipment issue records
Inventory sheets

PERFORMANCE GUIDE:

1. Review information collection assignment with supervisor:
    A. Information to be collected.
    B. Format for reporting information.
    C. Due date.
2. List supply items that were used, issued, lost or broken:
    A. Name or description of supply item.
    B. Quantity used, issued, lost or broken.
3. Identify how many of each supply item should be kept in stock:
    A. Check inventory sheet.
    B. Check ordering information (if ordering must be done in quantities).
4. Identify equipment which will require servicing, repairing or replacing.
5. Identify equipment items that should be purchased to:
    A. Meet high demand for use of current equipment.
    B. Improve current program.
    C. Expand current program.
6. Identify lowest price for each supply or equipment item:
    A. Consider urgency of need by agency.
    B. Consider quantity to be ordered.
    C. Consider availability of item.

PERFORMANCE GUIDE: (cont.)

  - D. Consider shipping time/immediacy of need.
  - E. Consider relationships/accounts with a particular vendor.
  - F. Consider other items to be ordered.
    NOTE: Ordering from the same vendor may save shipping and handling costs and paperwork.
  - G. Consider brand loyalty (quality).

7. Summarize and record information collected in steps 2-6.
8. Report projected costs to supervisor.

SOURCE OF STANDARD:

Writing team of incumbent workers
The occupational therapy manager

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 21

TASK: Compile departmental data.

STANDARD OF PERFORMANCE OF TASK:

The required information must be legible, accurate and recorded on a timely basis.

CONDITIONS FOR PERFORMANCE OF TASK:

Department data sheets

PERFORMANCE GUIDE:

1. Identify data sheets requiring updating:
   A. Attendance.
   B. Time sheets.
   C. Telephone calls.
   D. Equipment issue.
   E. Splint issue/follow-up.
   F. Travel records.
   G. Employee records.
   H. Continuing education points.
   I. Educational tracking forms.
   J. Quality assurance.
2. Enter information as required.
3. File data sheet according to department procedures.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 22

TASK: Write occupational therapy position job description.

STANDARD OF PERFORMANCE OF TASK:

The job description must be accurate and submitted in the format that was requested. Occupational therapy procedures must be referred to by a standard name or described so that misinterpretations are avoided. The job description must be approved by the chief occupational therapist, administrator or personnel department.

CONDITIONS FOR PERFORMANCE OF TASK:

Dictation equipment
Personnel department
Writing instrument/typewriter
Occupational therapy books
Computer and specialized software
Chief occupational therapist or administrator
Professional organization role delineation documents

PERFORMANCE GUIDE:

1. Identify purpose of job description:
   - A. Define or redefine current employee's job.
   - B. Recruitment or selection of new employee.
   - C. Functional job description (i.e. a detailed description of specific requirements of a particular task).
2. Collect information about the occupational therapy job:
   - A. Purpose of the job.
   - B. Job duties.
   - C. Level of supervision.
   - D. Job specifications:
     - (1) Education.
     - (2) Certification.

PERFORMANCE GUIDE: (cont.)

        (3) Training.
        (4) Experience.
        (5) Skills.
        (6) Special characteristics.
    E. Measurable criteria for evaluation of performance of task if writing a functional job description.
3. Organize job description information.
   NOTE: Similar tasks should be listed together.
4. Submit draft job description to chief occupational therapist, administrator or personnel department.
   NOTE: Clerical staff may be helpful in preparing draft job description
5. Edit job description as per comments from chief occupational therapist, administrator or personnel department.
6. Submit final job description.
7. File a copy of the final job description.

SOURCE OF STANDARD:

Writing team of incumbent workers
The occupational therapy manager

DUTY: PERFORMING ADMINISTRATIVE TASKS

PERFORMANCE OBJECTIVE NO. 23

TASK: Complete work order for equipment.

STANDARD OF PERFORMANCE OF TASK:

The information requested on the work order form must be provided. The work order must be legible, signed and forwarded.

CONDITIONS FOR PERFORMANCE OF TASK:

Work order form

PERFORMANCE GUIDE:

1. Record work order information on work order form:
   A. Work to be performed.
   B. Location.
   C. Scheduling information:
      (1) When work can begin.
      (2) Hours during which work can be performed.
      (3) Due date.
   D. Contact person.
2. Secure signature of supervisor or administrator.
3. Copy completed work order.
4. Forward completed work order to facility maintenance department.
5. File a copy of the completed work order.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 24

TASK: Communicate using intercom.

STANDARD OF PERFORMANCE OF TASK:

Intercom signals must be responded to immediately. Communications must be clear, audible and conducted in a courteous and professional manner. Messages must be legible.

CONDITIONS FOR PERFORMANCE OF TASK:

Call list
Message pad
Intercom

PERFORMANCE GUIDE:

1. Initiate communications:
   - A. Wall intercom:
     - (1) Press talk button, and speak loudly and clearly.
     - (2) Release button and listen.
   - B. Phone intercom:
     - (1) Push intercom button, or seek operator assistance.
     - (2) Pick up phone receiver, and talk or listen.
2. Respond to intercom signal:
   - A. Identify yourself and offer assistance.
   - B. Record message or respond to directions.
   - C. Locate person needed or deliver message.
     NOTE: Seek assistance of supervisor if needed.
3. Return intercom to inactive state when call is completed.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 25

TASK: Communicate using telephone.

STANDARD OF PERFORMANCE OF TASK:

Telephone calls must be responded to promptly. Communications must be clear, audible and conducted in a courteous and professional manner. Messages must be legible.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Message pad
Telephone directory
List of frequently called numbers

PERFORMANCE GUIDE:

1. Locate department telephones.
2. Place a telephone call.
    A. Locate the phone number of the person being called.
    B. Dial the number.
    C. Wait for other party to acknowledge connection.
    D. Speak clearly, audibly, and politely to other party.
        (1) Identify yourself, including name, position, and agency.
        (2) Indicate party to whom you wish to speak.
        (3) Obtain or verify information.
        (4) Indicate appreciation.
        (5) Replace telephone receiver (hang-up).
3. Respond to a telephone call.
    A. Identify yourself and department.
    B. Identify nature of the call.
        (1) Request for information.
        (2) Message for another person.

PERFORMANCE GUIDE: (cont.)

4. Verify all information given or received.
5. Document long distance call in accordance with department guidelines.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 26

TASK: Greet patient or visitor.

STANDARD OF PERFORMANCE OF TASK:

Patient or visitor must be acknowledged in a pleasant manner, identified by name, informed of waiting time and directed to waiting area.

CONDITIONS FOR PERFORMANCE OF TASK:

Visitor
Department treatment log
Department sign in sheet

PERFORMANCE GUIDE:

1. Observe when patient or visitor arrives.
2. Acknowledge the person in a pleasant manner as soon as possible.
3. Ask the person's name and purpose of visit.
4. Greet patient:
   - A. Verify patient's appointment.
   - B. Sign in patient.
   - C. Inform patient where to be seated and offer reading material.
   - D. Notify department staff of patient's arrival.
5. Greet visitor:
   - A. Determine if visit has been planned.
   - B. Question visitor on reason for visit if visit has not been planned.
   - C. Notify department staff of the visitor's request.
   - D. Determine if visit will be allowed.
   - E. Inform visitor of the status of his/her request.
   - F. Direct visitor to waiting area and offer reading material if visit will be allowed.

PERFORMANCE GUIDE: (cont.)

6. Inform person as to length of wait before department staff will be with them.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 27

TASK: Respond to request for service.

STANDARD OF PERFORMANCE OF TASK:

Request for service must be documented and assessment scheduled promptly.

CONDITIONS FOR PERFORMANCE OF TASK:

Referral
Telephone
Mail service
Consent form
Patient's records

PERFORMANCE GUIDE:

1. Identify request for service.
2. Secure patient's records.
   NOTE: Check for signed consent form.
3. Identify assessment procedures required:
   A. As specified in referral.
   B. As advised by occupational therapist.
   C. As done in previous similar situations.
4. Schedule assessment appointments.
5. Document request for service.

SOURCE OF STANDARD:

Writing team of incumbent workers
Willard and Spackman's occupational therapy

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 28

TASK: Respond to request of patient's funding source.

STANDARD OF PERFORMANCE OF TASK:

Request for information must be documented, and information must be provided on a timely basis according to department policy.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Consent form
Patient's records
Request from funding source

PERFORMANCE GUIDE:

1. Secure patient's records.
   NOTE: Check for signed release of information form.
2. Identify assessment/treatment procedures planned/performed.
3. Determine if the funding source needs a written record of information from your agency, verbal notification, or both.
4. Communicate information in person or by telephone or intercom.
   NOTE: When you have been connected to the funding source personnel, identify yourself by name, employing agency, job position, and role in the patient's treatment.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 29

TASK: Conduct public relations activities.

STANDARD OF PERFORMANCE OF TASK:

The objectives of the activities must be in congruence with the department's goals. Public relation activities must be selected and the performance of the activities must fulfill the department's objectives for the selected activity.

CONDITIONS FOR PERFORMANCE OF TASK:

Typewriter
Display materials
Audio visual equipment
Adaptive equipment
Art and craft projects

PERFORMANCE GUIDE:

1. Formulate the objectives of the public relations activities.
   NOTE: Target group must be identified.
2. Submit objectives to chief occupational therapist or administrator for approval.
3. Select type of public relations activity most beneficial:
   A. Informational bulletins brochures, and/or newsletters.
   B. Informational displays.
   C. Informational radio and/or television announcements or shows.
   D. Informational newspaper articles or column.
   E. Special classes/in-services.
   F. Community goodwill activities.
   G. Holiday events.
   H. Employee of the month.
4. Choose a specific topic for activity:
   A. Patient success stories.
   B. Arts and crafts show/contest.
   C. Health care tips.
   D. Newly developed adaptive equipment.

PERFORMANCE GUIDE: (cont.)

    E. Occupational therapy career opportunities.
    F. Services offered.
    G. General information.
    H. Recruit volunteers.
    I. Health fairs.
    J. Fund raisers.
    K. Screening information.
    L. Support groups.
    M. Introduce new residents.
    N. Introduce new employees.
    O. Going away party for residents/employees who are leaving.
5. Plan activity.
6. Submit plan for activity to supervisor.
7. Perform selected activity after obtaining approval.

SOURCE OF STANDARD:

Writing team of incumbent workers
The occupational therapy manager

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 30

TASK: Refer patient to specialized service.

STANDARD OF PERFORMANCE OF TASK:

Referral, including reasons for referral, must be documented, whenever knowledge or expertise of another professional is needed. Patient must be provided with the names of more than one practitioner/agency if requested.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Referral form

PERFORMANCE GUIDE:

1. Identify specific reasons why patient should be referred to specialized service.
2. Notify patient of need for referral and specific reasons for referral.
3. Ask patient if he/she has a particular practitioner within the specialized field to which he/she wishes to be referred.
4. List practitioners within the specialized field who could provide the service if patient has not identified a particular practitioner.
   NOTE: Patient may need information regarding directions for reaching the practitioner's office.
5. Complete referral form.
6. Provide the patient with a copy of the referral form.
7. File a copy of the referral form.
8. Forward a copy of the referral to the selected practitioner.

SOURCE OF STANDARD:

Writing team of incumbent workers
Willard and Spackman's occupational therapy

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 31

TASK: Notify consulting occupational therapist or physician about developments requiring changes in patient's occupational therapy treatment plan.

STANDARD OF PERFORMANCE OF TASK:

Information regarding changes in patient's condition must be provided on time, in a courteous, professional manner. Written information must be legible, signed, dated and addressed so that it is deliverable. A copy of the correspondence must be filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Patient's records
Department stationary
Computer and specialized software

PERFORMANCE GUIDE:

1. Review patient's records for information regarding changes in patient's condition:
   A. Identify patient's condition when last seen by consulting occupational therapist or physician.
   B. Identify specific changes in patient's condition including:
      1. Date of changes in condition.
      2. Nature of changes in condition.
      3. Name of person that noticed or documented changes in patient's condition.
2. Identify consulting occupational therapist or physician.
3. Determine if the consulting occupational therapist or physician needs a written record of the information from your agency, verbal notification or both.

PERFORMANCE GUIDE: (cont.)

4. Communicate information in person or by telephone or intercom:
   - A. Identify yourself by:
     - (1) Name.
     - (2) Employing agency.
     - (3) Job position.
     - (4) Role in the patient's treatment.
   - B. Identify the patient by his/her full name, date of birth and identification number, as applicable.
   - C. Read aloud or recite from memory notations regarding changes in the patient's condition.
   - D. Answer questions.
5. Communicate information in written form:
   - A. Use agency stationary.
   - B. Record:
     - (1) Name of person to whom the correspondence is directed.
     - (2) Your name.
     - (3) Your job position.
     - (4) Your role in the patient's treatment.
     - (5) The patient's full name, date of birth and identification number, as applicable.
     - (6) Notations regarding changes in the patient's condition.
     - (7) Your telephone number and the times and dates you can be reached.
   - C. Sign and date the correspondence.
   - D. File a copy of the correspondence in the patient's file.
   - E. Forward a copy of the correspondence to the consulting occupational therapist or physician.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 32

TASK: Notify patient, family or significant others about developments requiring changes in patient's occupational therapy treatment plan.

STANDARD OF PERFORMANCE OF TASK:

Information regarding changes in patient's condition must be provided on a timely basis, in a courteous, professional manner and must be accurate. Written information must be legible, signed, dated and addressed so that it is deliverable. A copy of the correspondence must be filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Patient's records
Department stationary
Computer and specialized software

PERFORMANCE GUIDE:

1. Identify specific changes in patient's condition including:
   - A. Date of changes in condition.
   - B. Nature of changes in condition.
   - C. Name of person that noticed or documented changes in patient's condition.
2. Identify person who should be notified.
   NOTE: Check for release of information consent/form.
3. Determine if a written record of the information is needed.
4. Communicate information in person or using telephone or intercom.
   - A. Identify yourself by:
     - (1) Name.
     - (2) Employing agency.
     - (3) Job position.
     - (4) Role in the patient's treatment.

PERFORMANCE GUIDE: (cont.)

B. Identify the patient by his/her full name.
C. Read aloud or recite from memory notations regarding changes in the patient's condition.
D. Answer questions.

5. Communicate information in written form:
   A. Use agency stationary.
   B. Record:
      (1) Name of person to whom the correspondence is directed.
      (2) Your name.
      (3) Your job position.
      (4) Your role in the patient's treatment.
      (5) The patient's full name.
      (6) Notations regarding changes in the patient's condition.
      (7) Your telephone number and the times and dates you can be reached.
   C. Sign and date the correspondence.
   D. File a copy of the correspondence in the patient's file.
   E. Forward a copy of the correspondence to the patient's family member or significant other.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 33

TASK: Discuss patient information.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy assistant or aide must determine the person to whom they are talking and identify himself/herself. The patient must be identified by his/her full name, date of birth, and identification number, as applicable. Only information that is contained in the patient's occupational therapy records may be provided. Information that could compromise the patient's privacy or progress must be withheld. Information gained by the occupational therapy assistant or aide that could influence the patient's treatment must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Concerned party
Telephone

PERFORMANCE GUIDE:

1. Identify yourself including name, position and your role in the patient's care.
2. Verify the identification of the person seeking or providing patient information including name, position and their role in the patient's care.
   CAUTION: Release of information over the phone should be avoided unless you placed the call.
3. Verify patient's identification.
4. Review patient's records.
   NOTE: Verify that release of medical information form has been signed.

PERFORMANCE GUIDE: (cont.)

5. Present information:
   - A. New symptoms/conditions.
   - B. Changes in activities.
   - C. Patient's abilities/responses.
   - D. Patient's attitude.
   - E. Patient needs.
   - F. Patient's test results.
   - G. Patient's progress.
   - H. Patient's attendance.
   - I. Update medical information.
   - J. Review exercise programs/home programs.
   - K. Review special adaptations or suggestions.
   - L. Plan for discharge or referral.
6. Ask questions.
7. Answer questions.
8. Record new information.
9. Relay information to supervisor.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy: principles and practices

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 34

TASK: Write instructions for use of orthosis, prosthesis or adaptive equipment.

STANDARD OF PERFORMANCE OF TASK:

The instructions must be in congruence with the patient's occupational therapy goals, be legible, contain the required information and include the alternative communications materials most appropriate for the patient/support person. Instructions must be written in a clear style that facilitates comprehension by the patient. A copy of the instructions must be added to the patient's records.

CONDITIONS FOR PERFORMANCE OF TASK:

Tape
Scissors
Patient's records
Dictation equipment
Duplication equipment
Preprinted home programs
Computer and specialized software
Alternative communication equipment/supplies
Preprinted instructions for use of orthosis,
   prosthesis or adaptive equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Question patient/support person on home environment:
   A. Orthotic or prosthetic prescription.
   B. Adaptive equipment patient uses.
   C. Previous training.
   D. Availability of funds, equipment or supplies.
   E. Person's able to assist or supervise the patient.

PERFORMANCE GUIDE: (cont.)

3. Secure additional information from practitioner who has made or ordered the orthosis, prosthesis or adaptive equipment.
4. Question patient/support person regarding past, current and planned home activities.
5. Identify information that is needed by the patient.
    - A. Inspection of mechanical condition of orthosis, prosthesis or adaptive equipment.
    - B. How orthosis, prosthesis or adaptive equipment should fit.
    - C. Names/purposes of individual parts of the orthosis, prosthesis or adaptive equipment.
    - D. Care of the orthosis, prosthesis or adaptive equipment.
    - E. How to put on and remove the orthosis or prosthesis.
    - F. How to control the orthosis, prosthesis or adaptive equipment.
    - G. Suggestions for changes on patient's home/work environment.
    - H. Wearing schedule for orthosis or prosthesis.
    - I. Next scheduled appointment.
6. Record instructions for each activity:
    - A. Customize preprinted instructions.
    - B. Produce instructions using a combination of typing, printing, diagraming, drawing, cutting and taping.
    - C. Operate specialized computer software.
    - D. Dictate instructions.
7. Devise functional communications system for presentation of instructions.
8. Review instructions with patient/support persons.
9. Copy instructions.
10. File a copy of the instructions in patient's file.
11. File a copy of the instructions in a resource file for future reference.
12. Give a copy of the instructions to the patient/ support persons.
    NOTE: Plans must be made to review patient's progress after use of the instructions.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 35

TASK: Write instructions for an occupational therapy home program.

STANDARD OF PERFORMANCE OF TASK:

The selected home activities must be in congruence with the patient's occupational therapy goals. The instructions must be legible, contain the required information and include the alternative communications materials most appropriate for the patient/support person. The patient/support person must comprehend the instructions so that they are able to perform/participate in the activities. A copy of the home program must be added to the patient's records.

CONDITIONS FOR PERFORMANCE OF TASK:

Tape
Scissors
Patient's records
Dictation equipment
Duplication equipment
Preprinted home programs
Computer and specialized software
Occupational therapy resource material
Alternative communication equipment/supplies

PERFORMANCE GUIDE:

1. Review patient's records.
2. Question patient/support person on home environment:
   A. Restrictions.
   B. Availability of funds, equipment or supplies.
   C. Safety.
   D. Patient's willingness to perform at home.
   E. Person's who may assist or supervise the patient.

PERFORMANCE GUIDE: (cont.)

3. Question patient/support person regarding past, current and planned home activities:
    A. Work/homemaking activities.
    B. Hobbies.
    C. Exercise routine.
    D. Routine for activities of daily living.
4. Select home activities.
5. Record instructions for each activity:
    A. Customize preprinted instructions.
    B. Produce instructions using a combination of typing, printing, diagraming, drawing, cutting and taping.
    C. Operate specialized computer software.
    D. Dictate instructions.
6. Devise functional communications system for presentation of instructions.
7. Review instructions with patient/support persons.
8. Copy home program.
9. File a copy of the home program in patient's file.
10. File a copy of the home program in a resource file for future reference.
11. Give a copy of the home program to the patient/ support persons.
    NOTE: Plans must be made to review patient's progress after implementation of home program.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 36

TASK: Write thank-you letter.

STANDARD OF PERFORMANCE OF TASK:

The correspondence must state the reason the department is appreciative, be free of errors, signed, and addressed so that it is deliverable.

CONDITIONS FOR PERFORMANCE OF TASK:

Mail service
Dictation equipment
Department stationery
Computer and specialized software

PERFORMANCE GUIDE:

1. Identify recipient:
   A. Referring practitioner.
   B. Equipment supplier.
   C. Volunteer.
   D. Other support service.
   E. Person donating supplies equipment.
   F. Person providing training/workshops.
   G. Person participating in event or program.
   H. Exchange information.
2. Identify reason(s) why agency is appreciative.
3. Develop correspondence:
   A. Customize a form letter.
   B. Dictate letter.
   C. Type, write or print letter.
4. Sign letter.
5. Mail letter.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 37

TASK: Write progress notes.

STANDARD OF PERFORMANCE OF TASK:

Progress notes must be legible, include attendance or reason for absence, activities or modalities performed, the level at which the activities were performed and special problems or conditions. Patient's progress notes must be in reference to evaluation data or other baseline information. Progress notes must be dated and filed along with patient's records.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Writing instrument/typewriter
Dictation equipment
Treatment notes
Activity documentation
Equipment/materials used to assess progress (i.e., goniometer)

PERFORMANCE GUIDE:

1. Record occupational therapy activities or modalities performed:
   NOTE: Standard abbreviations may be used.
   A. Purpose of the activity.
   B. Patient's level of motivation.
   C. Accuracy of performance.
   D. Scores (i.e., number of exercises performed, length of time position was held).
2. Record statistics regarding other patient's conditions:
   NOTE: Record only comments on the patient's conditions for which the assistant or aide is qualified to comment. Record only symptoms, not diagnosis.

PERFORMANCE GUIDE: (cont.)

    - A. Illness.
    - B. Infection.
    - C. Injury.
    - D. Attitude (i.e., peer interaction, mood changes).
    - E. Alertness.
    - F. Statement about student told by teacher, aide other staff.
3. Include examples of patient's work with progress notes:
    - A. Patient's name.
    - B. Date of activity.
    - C. Instructions or cuing required for patient's performance.
    - D. Time required to complete activity.
4. File progress notes.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 38

TASK: Write discharge note.

STANDARD OF PERFORMANCE OF TASK:

The information must be accurate, and the discharge note must be legible, signed and dated. A copy of the discharge note must be added to the patient's file, and a copy must be forwarded to the appropriate practitioner.

CONDITIONS FOR PERFORMANCE OF TASK:

Discharge form
Patient's records
Dictation equipment
Computer and specialized software
Interdisciplinary care team
Mail service

PERFORMANCE GUIDE:

1. Review patient's records.
   NOTE: Discharge note may consist of only a statement in the patient's records which is recorded during an interdisciplinary care plan meeting.
2. Record reason(s) for discharge.
3. Record degree to which each of the patient's goals was met.
   NOTE: If goals were not met, an explanation of limiting conditions should be included.
4. Record patient's capabilities or deficits in activities of daily living.
5. Record adaptive equipment needed by patient.
6. Record to where patient is being discharged.
7. Record if follow up efforts are planned.
8. Record general comments:
   A. Patient's level of motivation.
   B. Patient's reactions to therapy.
   C. Patient's distractibility.
   D. Recommended supervision or rest.
   E. Patient's comments about his/her discharge.

PERFORMANCE GUIDE: (cont.)

9. Sign and date discharge note.
10. Copy discharge note.
11. Forward a copy of the discharge note to patient's physician or other practitioner.
12. File a copy of the discharge note.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 39

TASK: Complete consent form.

STANDARD OF PERFORMANCE OF TASK:

Patient and/or guardian must sign and date the consent form of their own free will following an explanation of the consent form and the evaluation or therapy to be performed. Consent form must include the required information, be legible and filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Agency consent form
Patient's family, support person or legal guardian

PERFORMANCE GUIDE:

1. Record pertinent information on consent form:
   - A. Patient's name.
   - B. Patient's identification number.
   - C. Patient's date of birth.
   - D. Evaluation or therapy to be performed.
2. Greet patient, patient's family, support person, and/or guardian.
3. Explain evaluation or therapy to be performed:
   - A. Reason for evaluation or therapy.
   - B. Procedures used.
   - C. Expected outcomes.
4. Evaluate the patient's/other's comprehension of the evaluation or therapy to be performed:
   - A. Acknowledgment of similar procedures performed in the past.
   - B. Explanation restated in their own words.
5. Ask patient/other to read, sign and date the consent form.

PERFORMANCE GUIDE: (cont.)

6. Encourage questions.
7. Answer any questions.
8. Check to see that consent form was signed and dated.
9. File the completed consent form.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 40

TASK: Create informational displays.

STANDARD OF PERFORMANCE OF TASK:

Informational display must meet predetermined objectives, clearly present the information, be attractive and in good taste, and approved by the supervisor.

CONDITIONS FOR PERFORMANCE OF TASK:

Calendars
Art supplies
Display area
Informational brochures
Lettering templates/supplies
Newspaper, magazine articles
Fasteners (tacks, staples, tape)

PERFORMANCE GUIDE:

1. Formulate the objectives of the display.
   A. Orientation information for patients:
      (1) Calendar/clock.
      (2) Seasonal display.
      (3) Holiday display.
      (4) Weather reports.
      (5) Schedule of events (for patient participation).
      (6) Current events.
   B. Public relations display.
   C. Patient therapy schedule.
   D. Staff work schedule.
   NOTE: Display should attempt to convey only a limited amount of information.
2. Plan display, including:
   A. Display location.
   B. Display size.
   C. Materials needed.

PERFORMANCE GUIDE:(cont.)

D. Focal point:
NOTE: A strong focal point is needed to attract attention, especially for patients with cognitive or visual impairments.

(1) Bright colors.
(2) Converging lines.
(3) Bold lettering.
(4) Movement.
(5) Three dimensional objects.
CAUTION: Displays that have small parts or sharp objects and can be reached by patients or visitors may create a safety hazard.

3. Secure approval of display objectives and/or plan with supervisor.
4. Schedule time to build display.
5. Collect needed materials.
6. Build display.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 41

TASK: Identify possible abuse.

STANDARD OF PERFORMANCE OF TASK:

Evidence of possible abuse must be documented in exacting terminology. Additional information must be collected such that evidence of possible abuse can be substantiated or refuted, and if warranted, authorities must be notified as soon as possible.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Other staff
Support persons
Patient's records
Department stationary

PERFORMANCE GUIDE:

1. Notice signs of possible abuse:
    - A. Bruises.
    - B. Body marks.
    - C. Changes in behavior.
    - D. Verbal clues given by patient.
2. Note signs of possible abuse that were noticed:
    - A. Date noticed.
    - B. Appearance of body marks.
    - C. Location of body marks.
    - D. Size of body marks.
    - E. Indications of recency of body marks.
    - F. Nature of change in behavior.
    - G. Exact comments made by patient in reference to possible abuse including context of comment and any questions asked of the patient.

PERFORMANCE GUIDE: (cont.)

3. Discuss the possibility of abuse with patient in a private setting.
   NOTE: Patient's mistrust or fear may work counter to obtaining accurate information.
   NOTE: Discussions with children must be handled gently.
   CAUTION: Patients may deliberately give false information with the intent to cause you to believe abuse has occurred when it has not occurred.
   CAUTION: It may be necessary to ask another person to witness all your dealings with the patient.
4. Discuss signs of possible abuse with other staff or support persons who may have also noticed signs of possible abuse.
5. Review patient's records for information that could account for signs of possible abuse.
6. Review patient's records for history of abuse.
7. Decide if information collected warrants reporting the possible abuse.
8. Organize information regarding possible abuse.
9. Report possible abuse to authorities if warranted.
10. Watch closely for future signs of possible abuse.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 42

TASK: Report unsafe condition.

STANDARD OF PERFORMANCE OF TASK:

Condition threatening patient's, staff's or general public's safety, must be relayed to persons empowered to render the situation safe or to the person the situation threatens as soon as possible.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Other staff
Patient's support persons
Agency maintenance or security

PERFORMANCE GUIDE:

1. Notice situation in which an unsafe condition exists.
2. Review situation in which an unsafe condition exists.
3. Identify specific problems which result in the unsafe condition.
   NOTE: If actions can be taken immediately to make the situation safer, those actions should be taken.
4. Identify persons who must be informed of the unsafe condition.
   A. Persons who could be injured.
   B. Persons designated to remedy the situation.
5. Notify persons designated to remedy the unsafe situation:
   A. Inside agency facilities:
      (1) Department staff.
      (2) Department supervisor.
      (3) Agency maintenance personnel.
      (4) Agency security personnel.

PERFORMANCE GUIDE: (cont.)

B. Outside agency facilities:
  (1) Patient.
  (2) Patient's family/support persons.
  (3) Patient's landlord.
  (4) Public social services.
  (5) Police or fire departments.
  (6) Utility companies.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 43

TASK: Secure emergency help.

STANDARD OF PERFORMANCE OF TASK:

The need for emergency help must be recognized and appropriate persons notified immediately. The need for emergency help must be real.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Intercom

PERFORMANCE GUIDE:

1. Identify a situation in which emergency help is required.
2. Identify type of emergency help required.
3. Identify persons best suited to provide the emergency help:
   - A. Inside agency facilities:
     - (1) Department staff.
     - (2) Department supervisor.
     - (3) Agency emergency services.
     - (4) Agency security.
   - B. Outside agency facilities:
     - (1) Patient's family/support persons.
     - (2) Neighbors.
     - (3) School nurse/teacher.
     - (4) Police or fire department.
4. Relay need for assistance to emergency personnel:
   - A. Emergency services requested.
   - B. Location at which help is needed.
   - C. Nature of the emergency.
   - D. Answer questions as needed.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 44

TASK: Answer inspector's questions.

STANDARD OF PERFORMANCE OF TASK:

Requested information must be provided accurately, clearly, and in a polite and professional manner. Clarification of unclear questions must be sought and questions that cannot be answered must be referred to an appropriate source.

CONDITIONS FOR PERFORMANCE OF TASK:

Inspector
Department records

PERFORMANCE GUIDE:

1. Acknowledge inspector if approached.
2. Continue work assignment.
3. Listen to question.
4. Seek clarification of question if needed.
5. Provide information if possible:
   A. General information (i.e., name, job position, duties).
   B. Location of equipment or supplies.
   C. Demonstrate standard procedure.
   D. Assist in locating information in files.
   NOTE: If uncertain of answer, politely refer question to supervisor or other staff.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: COMMUNICATING INFORMATION

PERFORMANCE OBJECTIVE NO. 45

TASK: Give professional testimony.

STANDARD OF PERFORMANCE OF TASK:

All requested information that the assistant or aide is qualified to provide must be provided in a professional and courteous manner. Information must be accurate.

CONDITIONS FOR PERFORMANCE OF TASK:

Legal council
Patient's records
Related services staff
Other occupational therapy staff

PERFORMANCE GUIDE:

1. Discuss your role in the testimony with the chief occupational therapist or administrator.
2. Identify time, date and location that the testimony will be given.
   NOTE: It may be necessary to alter the work schedule to allow time for preparation and testimony.
3. Review patient's records.
4. Identify information that may be pertinent to the testimony.
   NOTE: Information to be provided must be objective.
5. Discuss pertinent information with:
   A. Other occupational therapy staff.
   B. Evaluating occupational therapist.
   C. Supervisor.
   D. Legal council.
6. Organize notes prior to testimony.
7. Arrive at location where testimony is to be given at least 15 minutes prior to the scheduled starting time.

PERFORMANCE GUIDE: (cont.)

8. Respond to questions:
    A. Seek clarification of unclear questions.
    B. Answer those questions for which you are qualified to answer.
        NOTE: Refer to your notes when uncertain of information requested.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 46

TASK: Screen patient for need of occupational therapy evaluation.

STANDARD OF PERFORMANCE OF TASK:

Patients who need further educational and/or related service evaluation must be identified. Screening methods must match the patient's chronological age, educational and/or functional level and must be nonbiased. Recorded results must be accurate and legible.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Screening forms
Patient's school and/or medical records

PERFORMANCE GUIDE:

1. Receive request for screening from qualified person:
    A. Patient.
    B. Teacher.
    C. Caretaker.
    D. Related services staff.
    E. Special education planning team.
2. Document request for screening.
3. Develop screening plan with consulting occupational therapist.
4. Arrange for release of patient's records.
5. Identify pertinent details from patient's records including other health care providers.

PERFORMANCE GUIDE: (cont.)

6. Interview patient, family and/or support persons:
    A. Greet persons.
    B. Explain overall occupational therapy services.
    C. Explain reason for screening.
    D. Ask questions.
       NOTE: A standard screening form may be used to identify information that must be obtained.
       CAUTION: Information regarding patient's performance abilities obtained through an interview may be less reliable than observations of patient performing a task.
7. Observe patient performing tasks.
8. Record results.
9. Summarize results.
10. Report results to occupational therapist.

SOURCE OF STANDARD:

Writing team of incumbent workers
Willard and Spackman's occupational therapy

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 47

TASK: Assist with screening of patient for need of occupational therapy evaluation.

STANDARD OF PERFORMANCE OF TASK:

Assigned screening tasks must be performed on time by the person doing the screening. Recorded results must be accurate and legible.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Screening forms
Patient's school and/or medical records

PERFORMANCE GUIDE:

1. Discuss your role in the screening process with the occupational therapist.
2. Perform assigned screening tasks:
    - A. Review patient's records.
    - B. Interview patient, family and/or support persons.
    - C. Observe patient performing tasks.
3. Record results.
4. Summarize results.
5. Report results to occupational therapist.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 48

TASK: Select evaluation components to be evaluated.

STANDARD OF PERFORMANCE OF TASK:

Aspects of the patient's abilities must be considered for evaluation, and decisions on areas to be evaluated must be defensible based on available patient information. The suggestions for areas to be evaluated must be accepted by the chief occupational therapist.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Referral for evaluation
Department evaluation checklist
Department guidelines for quality treatment

PERFORMANCE GUIDE:

1. Review patient's referral.
2. Review patient's records.
3. Identify the need for evaluation of the patient's:
    - A. Medical records.
    - B. Personal history.
    - C. Daily living skills.
    - D. Sensorimotor skills.
    - E. Cognitive skills.
    - F. Psychosocial skills.
    - G. Needs regarding therapeutic adaptation or prevention.
4. Note areas suggested for evaluation.
5. Report suggestions for areas to be evaluated to the occupational therapist.

SOURCE OF STANDARD:

Writing team of incumbent workers
Willard and Spackman's occupational therapy

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 49

TASK: Plan evaluation methodology.

STANDARD OF PERFORMANCE OF TASK:

Applicable data collection procedures must be considered and decisions on evaluation methodology to be used must be defensible based on available patient information. The suggestions for evaluation methodology must be accepted by the chief occupational therapist.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Department guidelines for quality treatment

PERFORMANCE GUIDE:

1. Review areas selected for evaluation.
2. Select specific data collection procedures:
   NOTE: Consider the patient's schedule, the therapist's schedule, the availability of needed materials, equipment, and facilities and the urgency of the evaluation.
   - A. Standardized tests.
   - B. Performance checklists.
   - C. Activities designed to evaluate specific skills.
3. Note the planned evaluation methodology.
4. Report suggestions for evaluation methodology to the occupational therapist.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 50

TASK: Explain evaluation plan.

STANDARD OF PERFORMANCE OF TASK:

The patient and/or support person must be greeted in a professional and courteous manner and must be provided with the required information. All information must be accurate, and communications methods must be adapted to meet the abilities of the patient/support person.

CONDITIONS FOR PERFORMANCE OF TASK:

Evaluation plan
Patient's support person

PERFORMANCE GUIDE:

1. Greet patient and/or support persons.
2. Review reason(s) evaluation is to be done.
   NOTE: If patient/support persons do not understand reasons for or importance of evaluation, they may not fully cooperate.
3. Inform patient/support person of:
   - A. Who will be performing the evaluation.
   - B. Where the evaluation will take place.
   - C. When the evaluation will take place.
   - D. What will take place during the evaluation.
   - E. The responsibilities of the patient/support perso
   - F. How the information will be used.
4. Encourage questions.
5. Answer questions.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 51

TASK: Conduct an interview.

STANDARD OF PERFORMANCE OF TASK:

Specific information, as determined by the type of interview, must be collected. Notes must be legible, organized, signed, dated and filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Note pad
Patient's records
Department interview form
Functional communications devices/supplies

PERFORMANCE GUIDE:

1. Review purpose of the interview with supervisor.
2. Review patient's records.
3. Prepare interview area.
   NOTE: Allocations for patient's communications deficiencies must be made.
4. Greet patient.
5. Explain interview process to patient:
   A. Purpose.
   B. Procedures.
   C. Confidentiality.
      NOTE: Patient should be encouraged to ask questions in order to make patient feel at ease.
6. Ask patient questions.
7. Record information.
   NOTE: Seek clarification of unclear answers.
   CAUTION: Information collected in an interview regarding patient's skills may not be as reliable as observation of patient performing the skill.
8. Answer any questions asked by the patient.

PERFORMANCE GUIDE: (cont.)

9. Sign and date interview form.
10. File interview form.
11. Discuss interview results with staff if applicable.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 52

TASK: Administer test following standard procedures.

STANDARD OF PERFORMANCE OF TASK:

The patient must be greeted, communications established and patient conditions noted. Patient must be directed in testing activity according to test manufacturer's instructions or according to instructions from supervisor. Testing activities must be altered to accommodate patient's abilities. Notes must be legible, organized, signed, dated and filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Note pad
Timing device
Patient's records
Testing materials
Testing instructions
Department testing form
Functional communications devices/suppliers

PERFORMANCE GUIDE:

1. Review test administration assignment with supervisor.
2. Review patient's records.
3. Prepare therapy area.
4. Note patient conditions that could affect testing.
5. Secure patient.
6. Inform patient of test to be performed.
7. Escort or transport patient to therapy area.
8. Direct patient in performance of testing activity.
9. Record testing information.
10. Answer questions asked by the patient.

PERFORMANCE GUIDE: (cont.)

11. Sign and date the testing information form.
12. File testing form.
13. Discuss testing information with staff if applicable.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 53

TASK: Analyze evaluation data.

STANDARD OF PERFORMANCE OF TASK:

All available information must be considered and additional information collected as needed. Evaluation results must be defensible based on available information and accepted by chief occupational therapist.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Patient's evaluation results
Occupational therapy resource materials

PERFORMANCE GUIDE:

1. Review patient's records and evaluation data.
2. Discuss evaluation data with person performing an individual component of the evaluation if applicable.
3. Compare evaluation data to standard scores or normal developmental sequence.
4. Formulate preliminary hypothesis regarding patient's condition.
5. Collect additional information if needed.
6. Formulate final decision regarding patient's condition.
7. Summarize and record evaluation results.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 54

TASK: Formulate evaluation recommendations.

STANDARD OF PERFORMANCE OF TASK:

All available information must be considered and additional information collected as needed. Evaluation recommendations must be defensible based on available information and accepted by the chief occupational therapist.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Patient's evaluation results
Occupational therapy resources materials

PERFORMANCE GUIDE:

1. Review patient's records and evaluation results.
2. Discuss evaluation results with occupational therapist or other staff if needed.
3. Identify how an occupational therapy program can benefit the patient:
   A. Fulfillment of ordinary health needs.
   B. Prevention of occupational behavior dysfunction.
   C. Change processes of development or restoration.
   D. Maintenance of functioning.
   E. Management of disabling behaviors.
4. Discuss your suggestions for evaluation recommendations with the occupational therapist.
5. Record evaluation recommendations.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 55

TASK: Record evaluation information and recommendations.

STANDARD OF PERFORMANCE OF TASK:

All recorded information must be accurate and legible and must conform to the Uniform Terminology for Reporting Occupational Therapy Services or department policy as applicable.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Evaluation in progress
Evaluation quick notes
Evaluation recording form
Writing instrument/typewriter

PERFORMANCE GUIDE:

1. Identify appropriate section of evaluation recording form or patient's records on which to record information.
2. Write, type or print information on evaluation recording form.
   NOTE: Seek clarification of quick notes if uncertain of intended meaning.
   NOTE: Refer to Uniform Terminology for Reporting Occupational Therapy Services as needed.
3. Review information recorded for errors.
4. Correct errors.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING DIAGNOSTIC MEASURES

PERFORMANCE OBJECTIVE NO. 56

TASK: Evaluate home or work site.

STANDARD OF PERFORMANCE OF TASK:

Decisions regarding changes in patient's home or work environment must be reached based on collection of objective information and input from patient, support persons, and/or employer. Suggestions for modifications must address patient's functional independence and safety. Notes must be legible, organized, signed, dated and filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Note pad
Tape measure
Transportation
Patient's records
Patient's home/work site
Patient/support person/employer
Department home/work site evaluation form

PERFORMANCE GUIDE:

1. Identify purpose of evaluation.
2. Review patient's records:
   A. Patient's deficiencies.
   B. Patient's adaptive equipment.
   C. Patient's use of support persons.
3. Schedule evaluation.
4. Secure directions for reaching the patient's home/work site.
5. Collect required equipment for home/work site evaluation.
6. Travel to patient's home/work site.
7. Greet patient/support persons/employer.
8. Build rapport with patient/support persons/employer.
9. Evaluate entrances:
   A. Width of most narrow point.
   B. Corners.
   C. Stairs.

PERFORMANCE GUIDE: (cont.)

    D. Rails.
    E. Lighting.
    F. Pavement/flooring.
    G. Locks/other security measures.
    H. Direction of door opening.
    I. Clutter (i.e. shoes on stairs, garbage in hallway).

10. Evaluate arrangement of home facilities used for activities of daily living:
    A. Furniture placement (in regards to transfers).
    B. Size of kitchen.
    C. Accessibility of kitchen appliances and supplies.
    D. Direction of door opening on refrigerator or stove.
    E. Size of bedroom.
    F. Accessibility of bedroom closets and storage areas.
    G. Size of bathroom.
    H. Bathroom equipment.
    I. Location of light switches.
    J. Location of telephone.
    K. Accessibility of laundry facilities.
    L Location of fire extinguisher and smoke detectors.
11. Evaluate system for notification of emergency services.
12. Evaluate patient's home/work support services:
    A. Family members living in home.
    B. Visiting practitioners, family or friends.
    C. Neighbors/other employees.
13. Discuss recommended changes in home/work environment.
    NOTE: Minor changes may be made during visit.
    NOTE: Involving patient, support person, and/or employer in decision making process may increase likelihood that suggested changes are made.
14. Record home/work site evaluation information.
15. Encourage questions from the patient/support persons/employer.
16. Answer questions.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy: Practice skills for physical dysfunction

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 57

TASK: Develop patient's occupational therapy treatment plan.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy goals must be in congruence with the department guidelines for quality treatment, and the treatment plan must be coordinated with the activities of other health care services. The treatment plan must be legible, signed, dated, and filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Referral
Patient's records
Resource materials
Dictation equipment
Interdisciplinary team
Department treatment plan form
Computer and specialized software
Interdisciplinary evaluation results
Department guidelines of quality treatment

PERFORMANCE GUIDE:

1. Review interdisciplinary evaluation data.
2. Develop long-term and short-term goals.
   NOTE: Consult interdisciplinary team and evaluating therapist.
3. Select frequency of occupational therapy sessions.
4. Select duration of individual occupational therapy sessions.
5. Record treatment plan:
   A. Complete department treatment plan form.
   B. Dictate treatment plan.
   C. Operate specialized software.

PERFORMANCE GUIDE: (cont.)

6. Proofread treatment plan.
7. Sign and date treatment plan.
8. Copy treatment plan.
9. File treatment plan.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 58

TASK: Assist in developing a patient's occupational therapy treatment plan.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy goals must be in congruence with the department guidelines for quality treatment, and the treatment plan must be coordinated with the activities of other health care services.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Resource materials
Dictation equipment
Interdisciplinary team
Department treatment plan form
Computer and specialized software
Interdisciplinary evaluation results
Department guidelines of quality treatment

PERFORMANCE GUIDE:

1. Discuss your role in the treatment planning with the occupational therapist.
2. Perform assigned tasks:
    A. Develop long-term and/or short-term goals.
    NOTE: Consult interdisciplinary team and evaluating therapist.
    B. Select frequency and duration of therapy sessions.
    C. Record program plan:
        (1) Complete department program plan form.
        (2) Dictate program plan to recording device.
        (3) Operate specialized software.
    D. Copy program plan.
    E. File program plan.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 59

TASK: Implement a new patient's occupational therapy orders.

STANDARD OF PERFORMANCE OF TASK:

The assistant's or aide's interpretation of the orders must be the same as that of the occupational therapist. Requested occupational services that may not be in the best interest of the patient must be reported to the occupational therapist. All preparations required to carry out the requested services must be made.

CONDITIONS FOR PERFORMANCE OF TASK:

Other staff
Patient's records
Patient's family or support persons
Patient's occupational therapy orders

PERFORMANCE GUIDE:

1. Read patient's medical records.
2. Compare the patient's diagnosis to the requested occupational therapy treatment.
3. Question patient, patient's family or support persons, other staff or physician if orders are unclear.
4. Identify and report requested services that you feel would not be in the best interest of the patient.
5. Make preparations for treatment:
    - A. Order supplies or equipment.
    - B. Schedule space or equipment.
    - C. Schedule patient's appointment.
6. File patient's occupational therapy orders.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 60

TASK: Formulate recommendations for changes in treatment plan.

STANDARD OF PERFORMANCE OF TASK:

The recommended changes must be in congruence with the department guidelines for quality treatment and based on reliable information.

CONDITIONS FOR PERFORMANCE OF TASK:

Other staff
Patient's records
Patient's family/support persons

PERFORMANCE GUIDE:

1. Review patient's progress notes.
2. Identify patient's progress toward achieving long-term and short-term goals.
3. Identify:
   A. Goals that may be inappropriate.
   B. Treatment plans that may be inadequate.
4. Identify possible changes in frequency and/or duration of individual occupational therapy sessions.
5. Discuss possible changes in treatment plan with patient, patient's family, or support persons and other staff.
6. Note recommended changes in patient's records and/or report recommendations to occupational therapist.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 61

TASK: Complete prescription forms.

STANDARD OF PERFORMANCE OF TASK:

Notification must be made prior to expiration of any present forms and at regular intervals thereafter.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
List of prescriptions
Department stationary
Referral of new patient
Blank prescription/parent consent forms

PERFORMANCE GUIDE:

1. List newly referred patients.
2. List any patients whose prescription/parent consent form will be expiring within 2 months or as guidelines dictate.
3. List patients whose form(s) have expired.
4. List patients whose parents have been informed but who have not provided prescription form.
5. Record all required information for each listed patient:
   A. Patient's name and address.
   B. Teacher.
   C. School.
   D. File number.
   E. Date that complete form was/is due.
6. Notify parents of need for prescription form:
   A. Telephone.
   B. Send letter.
   NOTE: Include blank forms if notifying by mail.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 62

TASK: Analyze tasks and activities.

STANDARD OF PERFORMANCE OF TASK:

A determination must be made as to the appropriateness of the activity for the specific patient, including reasons why the activity is or is not appropriate, and how the activity could be altered. The steps, key points of each step, and tools, equipment and materials required must be listed for an activity that has been determined to be appropriate.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Activity analysis form
Tools, equipment and/or materials required to perform the specific task or activity

PERFORMANCE GUIDE:

1. Review patient's records.
2. Identify an activity that may contribute to the achievement of the patient's goals.
3. Evaluate the explicit aspects of the activity including:
    - A. Adaptive skills required by patient.
    - B. Extent that the activity can be altered to accommodate the patient's skills, and the time, space, materials and equipment available for the activity.
    - C. Cultural implication of the activity.
    - D. Age appropriateness of the activity.
    - E. Safety concerns.
    - F. Cost.
4. Evaluate the activity in the context of the patient's condition and needs.
5. Plan changes in the activity allow patient to achieve goals.

PERFORMANCE GUIDE (cont.)

6. Prepare for instruction in the activity.
   NOTE: The activity should be worked through in order to do a complete analysis.
   A. Outline the steps of the activity.
   B. Outline the key points of each step.
   C. List all tools, materials and equipment needed for the activity.
      NOTE: Consider the patient's condition and specifically how the patient will perform each of the steps.

SOURCE OF STANDARD:

Writing team of incumbent workers
Willard and Spackman's occupational therapy

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 63

TASK: Coordinate the occupational therapy treatment plan with support persons.

STANDARD OF PERFORMANCE OF TASK:

The goals of the treatment, the procedures and purpose of the each activity must be understood by the person performing/conducting the activity so that they can demonstrate the procedure and state the purpose of each activity. Patient's appointments must be scheduled.

CONDITIONS FOR PERFORMANCE OF TASK:

Treatment plan
Adaptive equipment
Patient's family/support persons
Functional communications equipment/supplies

PERFORMANCE GUIDE:

1. Greet patient and/or support persons.
   NOTE: Treatment plan for in-patients may be coordinated during staff meetings.
2. Explain the goals of the treatment plan.
   NOTE: Support persons and patients must be aware of patient's condition if goals are to be understood.
3. Provide a copy of the treatment plan.
4. Explain each activity:
   A. Give verbal directions.
   B. Demonstrate activity.
5. Evaluate patient's comprehension of each activity:
   A. Patient or support person acknowledges comprehension by restating the activity in their own words.
   B. Patient or support person demonstrates activity.

6. Seek questions from patient or support persons.
7. Answer questions from patient or support persons.
8. Schedule patient's appointments.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy: principles and practices

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 64

TASK: Plan a group activity.

STANDARD OF PERFORMANCE OF TASK:

Arrangements for conducting the group activity must be made including arranging the required space, equipment, tools, materials, and assistance. Potential problem(s) regarding interaction of group members must be identified prior to start of activity.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
History of activities performed by group

PERFORMANCE GUIDE:

1. Review parameters of the group:
    A. Size.
    B. Structure.
    C. Goals.
    D. Membership criteria.
    E. Past/present activities.
2. Identify the purpose of the group activity.
3. Identify an activity which could contribute to the achievement of the goals of the occupational therapy group.
4. Analyze the components of the activity.
5. Plan changes in the group activity to adapt the activity to achievement of the group goals.
6. Arrange for assistance in conducting the group activity.
7. Schedule the space and equipment needed for the group activity.
8. Secure required tools and materials.
9. Check/adjust the schedule of the group members to allow for participation.

PERFORMANCE GUIDE: (cont.)

10. Identify individual patients who will require gradual introduction into the group.
11. Prepare for instruction of the group activity.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy in mental retardation

DUTY: PLANNING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 65

TASK: Assist specialist (podiatrist, orthotist or wheelchair vendor) with selection of adaptive equipment.

STANDARD OF PERFORMANCE OF TASK:

Assistant or aide must make the patient feel comfortable, provide information as needed and carry out tasks as directed by the specialist.

CONDITIONS FOR PERFORMANCE OF TASK:

Specialist
Support persons
Patient's records

PERFORMANCE GUIDE:

1. Introduce specialist and patient.
   NOTE: If you have been able to establish rapport previously with the patient, your presence may help to make patient feel more comfortable.
2. Discuss patient's needs with specialist and patient.
3. Transfer and position patient.
4. Assist patient in undressing and dressing.
5. Assist patient with assistive/supportive devices.
6. Record information as required.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 66

TASK: Prepare therapy area.

STANDARD OF PERFORMANCE OF TASK:

Equipment, supplies, and materials must be identified, collected and arranged according to established departmental policies. Therapy environment must be conducive to therapy.

CONDITIONS FOR PERFORMANCE OF TASK:

Storage area
Scheduling log
Area for therapy
Patient's records
Cleaning supplies
Occupational therapy equipment/supplies

PERFORMANCE GUIDE:

1. Identify patient to receive therapy.
2. Review scheduling log to determine next patient.
3. Review patient's records to determine equipment, supplies and environment required for scheduled activities.
   NOTE: If traveling to a remote site, take additional items in the event that conditions warrant a change in the activities to be performed.
4. Remove items that are not needed from therapy area and place them in the storage area.
5. Retrieve items that are needed from the storage area and place them in the therapy area.
6. Modify therapy environment:
   A. Change lighting.
   B. Change temperature.
   C. Block out stimuli.
   D. Create additional stimuli.
   E. Locate/arrange seating, tables, mats, or other furniture.
   F. Clean table, equipment or supplies.

PERFORMANCE GUIDE (cont.)

7. Arrange for assistance:
   NOTE: It is better to secure assistance to avoid an emergency than to try to secure help in the event of an emergency.
   A. For patient's safety.
   B. For aide's safety.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 67

TASK: Build rapport with patient.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy assistant or aide must predict and undertake measures that will help in building rapport, alter interaction with patient according to patient's responses and adhere to standard conventions including personal appearance, sincerity, courtesy, honesty, confidentiality, privacy. The occupational therapy assistant or aid must inform patient of purpose and expected result of activities.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Wardrobe (variety of clothes for a variety of patients)

PERFORMANCE GUIDE:

1. Adapt your appearance to the situation:
   A. Neat, clean, and odor free.
   B. Style of clothes.
      NOTE: In-patients may expect health service personnel to wear white.
      NOTE: Children may be less threatened by clothes adorned with clowns, teddy bears, or cartoon characters.
2. Consider patient's age:
   A. Children may feel threatened by adults.
   B. Adolescents may be rebellious towards adults.
   C. Older adults may feel that their wealth of life experiences entitles them to special treatment.
3. Consider patient's communications abilities.
   NOTE: Patient's lack of communication abilities may result in frustration and work counter to attempts at building rapport.

PERFORMANCE GUIDE (cont.)

4. Review patient's records for information regarding patient's hobbies, work/homemaking activities, special interests, family or other possible topics for initiation of conversation.
   NOTE: Patient's support persons and other staff may be a source of information.
5. Initiate conversation:
   A. Greet patient.
   B. Inform patient of your name and your role in their treatment.
   C. Inform patient of purpose or goal of treatment.
   D. Speak with patient about a topic that is appropriate for the degree of rapport that has been established.
      NOTE: Patient may or may not immediately recall contact you have had with them previously and so should be reminded as needed.
6. Identify topics that the patient readily discusses.
7. Monitor patient's responses:
   A. Verbalizations.
   B. Withdrawal.
   C. Emotional responses.
   D. Body language.
8. Monitor responses:
   A. Speak clearly and at level which best facilitates patient's understanding.
   B. Allow patient to warm-up to you slowly, avoid forcing yourself on the patient.
   C. Control your emotional responses.
   D. Control messages sent via body language.
      NOTE: Standard conventions of politeness, privacy, and use of language apply.
9. Maintain rapport that has been established:
   A. Maintain patient confidentiality.
   B. Be honest.
   C. Explain the purpose of activities, especially when patient's discomfort is unavoidable, so patient knows why they are being subjected to discomfort.
   D. Identify areas in which patient has made gains.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 68

TASK: Give patient therapeutic massage.

STANDARD OF PERFORMANCE OF TASK:

The massage procedures must be in congruence with the patient's occupational therapy goals. Sensation must be induced, yet the patient must not be overwhelmed. Procedures must be altered according to patient's reactions. Patient's responses must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Towels
Lotion
Vibrator

PERFORMANCE GUIDE:

1. Inform patient of procedure and the purpose.
2. Wash hands and arms.
3. Prepare patient for massage.
4. Apply lotion to area of patient to be massaged.
   NOTE: Continue to apply lotion as needed.
5. Apply pressure and motion.
   NOTE: Use vibrator if applicable.
   NOTE: Stroke patient distally to proximally.
6. Question patient on sensitivity.
   CAUTION: Sensations should be induced but patient must not be overwhelmed.
7. Train patient/support person in massage procedures.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 69

TASK: Give patient heat therapy.

STANDARD OF PERFORMANCE OF TASK:

Heat treatment must last 10-20 minutes as indicated by treatment plan. Hot pack must remain warm for at least 20 minutes.

CONDITIONS FOR PERFORMANCE OF TASK:

Tongs
Timer
Towels
Hot packs
Treatment table
Instant hot packs
Hydrocollator hot unit

PERFORMANCE GUIDE:

1. Explain procedure to patient.
2. Identify treatment area and application technique.
3. Remove clothing from treatment area and position patient.
4. Check area to be treated for circulation, sensitivity, integrity, undiagnosed rash or contagious skin disease.
   CAUTION: Verify treatment with the occupational therapist prior to treating patient.
5. Identify type of hot pack wrap to be used:
   A. Hydrocollator hot pack.
   B. Instant hot pack.
6. Prepare hot pack to be administered to patient.
   A. Hydrocollator hot pack:
      (1) Remove a pack from the unit using tongs.
          CAUTION: Do not put your hand into the water.

PERFORMANCE GUIDE (cont.)

(2) Allow excess water to drip back into the tank.
CAUTION: Never use wet towels or wet pack covers. Water conducts heat more quickly than dry towels which could result in patient discomfort or burns.
(3) Fold ends of the cover or towel over the pack and secure if necessary.

B. Instant hot packs:
(1) Activate chemical hot pack following label instructions.
(2) Fold ends of towel over pack and secure if necessary.
CAUTION: Make sure that no portion of the pack is left exposed. If the unexposed pack contacts the patient's skin a burn my result.

7. Place the wrapped pack on patient's treatment area immediately.
NOTE: If a pack cover is used, a layer of toweling should be placed between the patient and the pack cover for hygienic purposes.
8. Place a towel over hot pack to help retain heat.
9. Inform the patient of the importance of calling you if the pack becomes too hot, too heavy or if the patient becomes uncomfortable for any reason.
10. Set timer.
11 Remove pack and toweling when timer sounds.
12. Assist patient in drying.
13. Check patient's skin for contraindications.
NOTE: Reassure patient that redness will disappear in about 30 minutes.
14. Return hot pack to heating unit or dispose of pack.
15. Place towels and linens in laundry basket.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 70

TASK: Give patient cold therapy.

STANDARD OF PERFORMANCE OF TASK:

A cold pack must be applied to the treatment area to prepare patient for therapeutic activity. Patient must be monitored.

CONDITIONS FOR PERFORMANCE OF TASK:

Ice
Timer
Water
Towels
Cold packs
Plastic bags
Treatment table
Instant cold packs
Hydrocollator/refrigerator

PERFORMANCE GUIDE:

1. Explain procedure, purpose and precautions to patient.
2. Identify treatment area and application technique.
3. Remove clothing from treatment area and position patient.
4. Check area to be treated for circulation, sensitivity, integrity, undiagnosed rash or contagious skin disease.
   CAUTION: Verify treatment with occupational therapist prior to treating patient.
5. Identify type of cold packs to be used.
   A. Instant cold packs.
   B. Hydrocollator cold packs.
   C. Plastic bag cold packs.
   D. Ice.
6. Wrap the cold packs with a towel or cold pack cover if needed.
7. Place the cold pack on the area to receive treatment.

PERFORMANCE GUIDE (cont.)

8. Set timer and monitor patient during treatment.
9. Remove pack and toweling when timer sounds.
10. Assist patient in drying.
11. Check patient's skin for contraindications.
12. Return pack to cooling unit or dispose of pack.
13. Place towels and linens in laundry basket.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 71

TASK: Train patient in eating and feeding skills.

STANDARD OF PERFORMANCE OF TASK:

The eating and feeding activities performed must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Dietary restrictions,and swallowing abilities must not be exceeded and the degree of potential risk (choking) must not exceed ability of emergency services that are present. Activities must be modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Apron
Napkins
Washcloth
Adapted chair/tray
Self-feeding equipment
Adapted eating utensils
Anti-drooling mechanism
Emergency support services
Food (pureed, ground, liquids)
Patient's records (dietary information)
Supportive/positioning equipment or materials

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
   NOTE: The environment of the therapy will depend on the therapeutic technique(s).
   CAUTION: Determine the extent of emergency support services and inform them of the nature of the activity so that they are prepared in the event of choking.
3. Escort or transport patient to therapy area.
4. Note patient's condition.

PERFORMANCE GUIDE (cont.)

5. Select activities/modalities for:
   - A. Positioning.
   - B. Environmental stimulations.
   - C. Oral motor functioning.
   - D. Motor planning.
6. Position patient.
   NOTE: Positioning must assure head control throughout eating activity.
7. Inform patient of activity/modality.
8. Administer modalities.
9. Direct patient in performance of activity.
   NOTE: Check patient's records for dietary restrictions.
   CAUTION: Oral motor abilities/deficiencies must be determined prior to intake of food.
10. Observe patient responses or abilities.
11. Give feedback.
12. Alter activity or methods if needed.
13. Reinforce/extinguish behaviors.
14. Motivate patient.
15. Repeat steps 7-14 for each activity.
16. Close therapy session.
17. Note responses to activity.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 72

TASK: Train patient in dressing skills.

STANDARD OF PERFORMANCE OF TASK:

Dressing techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the patient's abilities and resources. Patient's range of motion and ability to maintain balance must not be exceeded. Activities must be modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Dressing frames
Reaching devices
Dolls or mannequins
Clothes (varying degrees of difficulty in donning and removing)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area:
   A. Provide for patient's privacy.
   B. Arrange mat, table, bed, and chair as needed.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select activities/modalities for development of skills prerequisite to dressing:
   A. Sitting balance.
   B. Range of motion.
   C. Muscle tone.
   D. Strength/endurance.
   E. Grasp/pinch.
   F. Bilateral coordination.
   G. Visual attention.
   H. Space perception.
   I. Form perception.
   J. Figure-ground perception.

PERFORMANCE GUIDE (cont.)

    K. Body awareness.
    L. Motor planning.
    M. Memory.
6. Select dressing aids or clothing adaptations:
    A. Buttonhook.
    B. Zipper pull.
    C. Elasticized thread.
    D. Velcro.
    E. Dressing sticks.
    F. Long-handled shoe horn.
    G. Reaching tongs.
    H. Stocking aid.
    I. Elastic shoelaces.
7. Select the apparel items for which training will be provided:
    A. Discuss patient's deficiencies and abilities related to dressing skills.
    B. Discuss patient's current wardrobe and/or plans for additions to wardrobe.
    C. Discuss plans for adapting specific items of apparel.
8. Arrange for acquisition of apparel items needed for future training.
9. Select dressing position.
10. Transfer/position patient.
11. Inform patient of activity/modality.
12. Administer modalities.
13. Direct patient in use of dressing frames, dolls or mannequins.
14. Instruct patient in use of dressing aids or adapted clothing.
15. Direct patient in specific dressing skill:
    NOTE: Undressing is easier than dressing and so may be attempted first.
    A. Position patient.
        CAUTION: Dressing movements may challenge patient's ability to keep balance; precautions must be taken.
    B. Allow patient to attempt task.
        NOTE: Methods developed by patient may be best for the patient.
    C. Suggest changes in methods or alternative methods.
    D. Demonstrate procedures for specific patient conditions.

PERFORMANCE GUIDE (cont.)

    E. Provide cueing.
    F. Assist patient with limited range of motion.
    G. Give instruction in energy conservation/joint protection.
    H. Give instruction for dressing in cooperation with assistance from support person.

16. Observe patient responses.
    NOTE: Patient must be instructed to rest as needed.
17. Give feedback.
18. Reinforce/extinguish behaviors.
19. Motivate patient.
20. Close therapy session.
21. Note patient responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 73

TASK: Train patient in clothing care skills.

STANDARD OF PERFORMANCE OF TASK:

Clothing care techniques must be in congruence with the patient's occupational goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's ability to recognize potentially hazardous equipment or supplies must not be exceeded. Injury must be avoided and activities modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Clothes
Sewing kit/machine
Clothes storage area
Clothing care supplies
Laundry supplies and equipment (regular and adapted)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's clothing care skills needs.
3. Identify specific skills training needed by patient:
   A. Selection/recognition of laundry cleaning products.
      CAUTION: Some products may be poisonous or skin irritants.
   B. Scheduling of activities.
   C. Operation of equipment.
   D. Use of dry cleaning services or public laundromat.
   E. Storage of clothes.
   F. Mending/alterations.
   G. Adaptation/fabrications of clothes.

PERFORMANCE GUIDE: (cont.)

4. Train patient in specific skills.
   CAUTION: Question patient on step-by-step procedures prior to allowing patient to proceed.
5. Assist patient with:
   - A. Adaptive equipment/supplies.
   - B. Ambulation.
   - C. Balance.
     CAUTION: Use transfer belt if needed.
6. Monitor patient's:
   - A. Physical stamina.
   - B. Balance.
   - C. Cognitive abilities (problem-solving, memory).
   - D. Motivation equipment needs.
   - E. Adaptive equipment needs.
   - F. Safety awareness.
7. Identify activities to be performed by or with assistance from support persons.
8. Evaluate patient's ability to plan an activity.
9. Evaluate patient's ability to select supplies and equipment.
10. Evaluate patient's ability to use supplies and equipment.
11. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 74

TASK: Train patient in food preparation skills.

STANDARD OF PERFORMANCE OF TASK:

Food preparation techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Practices for sanitation, preservation, food selection and safety must be integrated into the patient's food preparation activities. Injury must be avoided and activities modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Meal list
Timing devices
Patient's records
Cookbooks adapter recipes
Kitchen utensils (regular and adapted)
Kitchen equipment (regular and adapted)
Food (requiring various degrees of preparation.
Adaptive equipment (ambulation, reaching, holding)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Explain purpose(s) of food preparation activity to patient:
   A. Training.
   B. Assessment prior to patient's return to home environment.
      NOTE: Prerequisite skill levels including the use of adaptive equipment should be addressed prior to attempting integration of skills.

PERFORMANCE GUIDE: (cont.)

3. Plan meal list with patient.
    A. Discuss facility's equipment/patient's equipment.
    B. Discuss patient's abilities.
    C. Discuss patient's food preferences.
    D. Discuss patient's recommended/prescribed diet.
4. Consult dietician regarding patient's meal list.
5. Cancel patient's meal.
    NOTE: Inform patient that regular meal has been cancelled and patient's meal depends on the patient's success in food preparation.
6. Secure materials.
7. Modify facility to reflect patient's home environment.
    NOTE: If training is taking place in patient's home, modifications of environment must be permanent or arrangements for permanent modifications must be made.
8. Review the objectives of the activity with the patient.
9. Question patient on step by step procedures prior to allowing patient to proceed.
10. Assist patient with:
    A. Adaptive equipment/supplies.
    B. Ambulation.
    C. Balance.
        CAUTION: Use transfer belt if needed
    D. Locate needed equipment.
        NOTE: Patient may be unfamiliar with arrangement of food preparation equipment and supplies.
11. Monitor patient:
    A. Physical stamina.
    B. Balance.
    C. Cognitive abilities (problem-solving, memory).
    D. Motivation.
    E. Adaptive equipment needs.
    F. Safety awareness.
12. Question patient regarding conditions within home food preparation environment:
    A. What will be prepared?
    B. What equipment is available?
    C. Who will provide assistance?

PERFORMANCE GUIDE: (cont.)

13. Suggest changes in home environment.
14. Question patient on safety procedures.
15. Assess outcome.
16. Close therapy session.
17. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 75

TASK: Train patient in grooming and hygiene skills.

STANDARD OF PERFORMANCE OF TASK:

Grooming and hygiene techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's privacy must be maximized and encouragement for routine completion of grooming and hygiene skills must be given. Activities must be modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Safety device/supplies
Bathing device/supplies
Hygiene device/supplies
Grooming device/supplies
Hair care device/supplies
Toileting devices/supplies
Oral hygiene devices/supplies

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's conditions.
5. Identify specific grooming and hygiene skills needed by patient:
    A. Bowel and bladder continence.
    B. Toileting.
    C. Bathing.
    D. Oral hygiene.
    E. Nasal hygiene.
    F. Nail care.

PERFORMANCE GUIDE (cont.)

G. Hair care.
H. Deodorant use.
I. Control of body and facial hair.
J. Appropriate use of makeup.
K. Feminine hygiene.

6. Devise plan for training in specific skills:
   A. Skills training provided by occupational therapy assistant or aide.
   B. Skills training provided by family.
   C. Skills training provided by related services.
7. Select time of day skills training will occur.
   NOTE: Grooming and hygiene skills training that occurs during the time of day during which patient would normally perform the activity may help avoid disorientation of patient.
8. Select procedure patient will use in performance of each activity including the use of adaptive equipment.
9. Direct patient in performance of task.
10. Monitor patient's performance of task or steps of the task until the task is mastered.
11. Motivate patient to perform activities.
12. Integrate patient into grooming group.
13. Plan appointment with barber/beautician.
14. Close therapy session.
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 76

TASK: Train patient in money management skills.

STANDARD OF PERFORMANCE OF TASK:

Money management activities performed must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's abilities relating to security of funds must be assessed and provisions made to avoid loss of funds due to patient's deficiencies. Activities must be modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Calendar
Banking system
Support persons
Wallet or purse
Bills to be paid
Patient's records
Currency and coins
Checks to be deposited
Checkbook/bank statements

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's money management needs.
3. Identify banking services available.
4. Identify specific skills training needed by patient:
    A. Recognition of currency and coins.
    B. Physical manipulation of currency and coins.
    C. Planning (income verses expenses).
    D. Paying bill/writing checks.
    E. Record keeping/balancing bank accounts.

PERFORMANCE GUIDE: (cont.)

5. Devise plan for training in specific skills:
    A. Skills training provided by occupational therapy assistant or aide.
    B. Skills training provided within school system.
    C. Skills training provided by family/support person.
6. Train patient in specific skills using simulations.
7. Train patient in specific skills using real situations.
8. Follow up training activities assigned to other persons.
9. Evaluate patient's ability to recognize and physically manipulate currency and coins.
10. Evaluate patient's ability to allocate funds.
11. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 77

TASK: Train patient in time-management skills.

STANDARD OF PERFORMANCE OF TASK:

Time-management scheduled activities must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Calendar/appointment book
List of patient's work/homemaking responsibilities

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's time-management needs.
3. Identify specific skills training needed by patient:
    A. Reading a clock.
    B. Reading a calendar.
    C. Scheduling of available time.
    D. Listing tasks to be performed.
    E. Prioritizing tasks to be performed.
    F. Limiting time spent on specific tasks.
4. Train patient on specific skills.
5. Review and suggest changes in patient's routine for activities of daily living.
6. Review patient's work/homemaking responsibilities.
7. Identify specific work/homemaking responsibilities that could be performed more efficiently:
    A. Tasks to be performed using adaptive equipment.
    B. Tasks to be performed by support persons.
    C. Foods requiring minimal preparation.

PERFORMANCE GUIDE: (cont.)

NOTE: Encourage patient to accept that time limits may not allow accomplishment of all that is desired.

8. Evaluate patient's ability to schedule activities.
9. Evaluate patient's ability to adhere to schedule of activities.
10. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 78

TASK: Train patient in shopping skills.

STANDARD OF PERFORMANCE OF TASK:

The activities performed must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's abilities regarding money management must be assessed, and provisions made to avoid loss of money due to patient's deficiencies. Activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Check book
Wallet or purse
Support persons
Patient's records
Currency and coins
Transportation equipment/services

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's shopping skills needs.
3. Identify specific skills needed by patient:
   A. List needed items:
      (1) Meal planning.
      (2) Cleaning/laundry supplies.
      (3) Grooming/hygiene supplies.
      (4) Clothing.
      (5) Entertainment/leisure.
   B. Use of public transportation.
   C. Price comparison.
   D. Money handling.
   E. Storage of perishable food items.
4. Train patient on specific skills using simulations.

PERFORMANCE GUIDE: (cont.)

5. Train patient on specific skills using real situations.
   NOTE: Prior knowledge of what patient will encounter in real situations is essential.
6. Identify shopping duties in which patient requires assistance.
7. Identify shopping duties to be performed by support persons.
8. Evaluate patient's ability to list needed items.
9. Evaluate patient's ability to handle money.
10. Evaluate patient's ability to obtain needed items.
11. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 79

TASK: Train patient in home-cleaning skills.

STANDARD OF PERFORMANCE OF TASK:

Home cleaning techniques performed must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's ability to recognize potentially hazardous equipment or supplies must not be exceeded. Injury must be avoided, and activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Cleaning supplies
Patient's records
Cleaning equipment (regular and adapted)
Adaptive equipment (ambulation, reaching, holding)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's home cleaning skills needs.
3. Identify specific skills training needed by patient:
   A. Selection/recognition of cleaning products.
      CAUTION: Some cleaning products may be poisonous or skin irritants.
   B. Scheduling of cleaning activities.
   C. Operation of cleaning equipment.
   D. Movement of furniture.
   E. Use of cleaning services.
   F. Sanitation (cooking/eating utensils).
4. Train patient in specific skills.
   CAUTION: Question patient on step-by-step procedures prior to allowing patient to proceed.

PERFORMANCE GUIDE: (cont.)

5. Assist patient with:
    - A. Adaptive equipment/supplies.
    - B. Ambulation.
    - C. Balance.

      CAUTION: Use transfer belt if needed.
6. Monitor patient's:
    - A. Physical stamina.
    - B. Balance.
    - C. Cognitive abilities (problem-solving, memory).
    - D. Motivation equipment needs.
    - E. Adaptive equipment needs.
    - F. Safety awareness.
7. Identify cleaning activities to be performed by or with assistance from support persons.
8. Evaluate patient's ability to plan cleaning activity.
9. Evaluate patient's ability to select cleaning supplies and equipment.
10. Evaluate patient's ability to use cleaning supplies and equipment.
11. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

PERFORMANCE OBJECTIVE NO. 80

TASK: Train patient in parental skills.

STANDARD OF PERFORMANCE OF TASK:

Child-care techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's ability to care for child must be assessed, and provisions made to avoid injury to the child due to patient's deficiencies. Injury must be avoided and activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Dolls
Support persons
Resource materials on parenting
Child-care supplies and equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's parental skills needs.
3. Identify specific skills training needed by patient:
   A. Feeding.
   B. Cleaning.
   C. Clothing.
   D. Education.
   E. First aid.
   F. Sanitation (cooking/eating utensils).
4. Train patient in specific skills.
   CAUTION: Question patient on step-by-step procedures prior to allowing patient to proceed.
5. Assist patient with adaptive equipment/supplies.

PERFORMANCE GUIDE (cont.)

6. Monitor patient's:
    - A. Physical stamina.
    - B. Cognitive abilities (problem-solving, memory).
    - C. Adaptive equipment needs.
    - D. Safety awareness.
7. Identify child care activities to be performed by or with assistance from support persons.
8. Note patient responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 81

TASK: Train patient in employment preparation skills.

STANDARD OF PERFORMANCE OF TASK:

Employment preparation activities must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Patient's strengths in terms of employability must be identified (i.e., resume). Activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Listing of job openings
Patient's adaptive equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's employment preparation needs.
3. Identify specific skills training needed by patient.
    A. Career awareness.
    B. Locate job openings.
    C. Completing an application
    D. Writing a resume.
    E. Interviewing.
4. Train patient in specific skills.
5. Assist patient with:
    A. Definition of career goals.
    B. Use of typewriter/writing instruments.
6. Arrange for role-playing or practice interviews.
7. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 82

TASK: Train patient in functional communications skills.

STANDARD OF PERFORMANCE OF TASK:

Functional communications techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Systems for communication of the need for emergency service must be functional. Activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Patient's records
Audio recording equipment
Adaptive communication equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's functional communication needs.
3. Identify specific skills training needed by patient:
   A. Use of adaptive communication equipment.
   B. Use of prerecorded emergency messages.
   C. Signaling, pointing, sign language, music (eg. singing, words).
   D. Signaling, gestures.
4. Train patient in specific skills.
5. Assist patient with adaptive equipment/supplies.
6. Arrange for dyadic/group interaction.
7. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 83

TASK: Train patient in object manipulation skills.

STANDARD OF PERFORMANCE OF TASK:

Object manipulation activities must be in congruence with the patient's occupational therapy goals, and contribute to the patient's maximum functional independence. Activities must be varied if formation of splinter skills are to be avoided. Injury must be avoided, and activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Balls
Puzzles
Theraputty
Pinch meter
Board games
Rubber bands
Playing cards
Patient's records
Grasp dynamometer
Art/craft/supplies

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's object manipulation needs.
3. Identify specific skills training needed by patient.
4. Analyze tasks that the patient must perform.
5. Direct patient in activity with suggestions for changes in methodology.
6. Engage patient in activities that challenge the patient's current level of coordination and dexterity.

PERFORMANCE GUIDE (cont.)

7. Assess patient's abilities on a continuous basis:
    - A. Size of objects that can be manipulated.
    - B. Speed at which objects can be manipulated.
    - C. Strength.
    - D. Endurance.
8. Alter activities to continuously challenge patient's abilities.
9. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 84

TASK: Train patient in play and leisure activities.

STANDARD OF PERFORMANCE OF TASK:

The activities performed must be in congruence with the patient's occupational therapy goals and be within the scope of the patient's abilities and resources. Selected activities must be in congruence with patient's interests. Injury must be avoided and activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Games
Support persons
Interest survey
Patient's records
Sporting equipment
Adaptive equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Identify activities that are of interest to the patient.
3. Identify specific training needed by patient:
    - A. Selection of play/leisure activities.
    - B. Scheduling time for play/leisure activities.
    - C. Energy conservation.
    - D. Joint protection.
4. Train patient in specific skills.
5. Assist patient with:
    - A. Adaptive equipment/supplies.
    - B. Ambulation.
    - C. Balance.
      CAUTION: Use transfer belt if needed.

PERFORMANCE GUIDE (cont.)

6. Monitor patient's:
    - A. Physical stamina.
    - B. Balance.
    - C. Cognitive abilities (problem-solving, memory).
    - D. Motivation.
    - E. Adaptive equipment needs.
    - F. Safety awareness.
7. Identify activities to be performed with assistance from support persons.
8. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 85

TASK: Train patient in relaxation techniques.

STANDARD OF PERFORMANCE OF TASK:

The relaxation techniques must be in congruence with the patient's occupational therapy goals and be within the scope of patient's abilities and resources. The therapy environment must be conducive to the technique, stressors must be avoided, and activities must be altered to accommodate the patient's reactions. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Time
Music
Support persons
Structured form
Exercise equipment
Biofeedback equipment
Quiet, dark environment
Vestibular stimulation equipment

PERFORMANCE GUIDE:

1. Review patient's records.
   CAUTION: Physician's or other specialist's recommendations for limits of activity must be followed.
2. Prepare therapy area.
   A. Modify environmental stimuli.
   B. Secure and test equipment.
   C. Inform others that interruptions must be avoided.
      CAUTION: Lack of preparation may result in problems causing stressors and may affect patient's ability to relax.
3. Escort patient to therapy area.
4. Note patient's conditions.
5. Assist patient in self assessment of stressors:
   A. Interview patient/support persons.
   B. Observe patient.
   C. Patient completes structured form.

PERFORMANCE GUIDE: (cont.)

6. Identify patient's characteristics influencing selection of relaxation technique:
   - A. Cognitive abilities.
   - B. Financial resources.
   - C. Availability of support persons.
   - D. Life style.
   - E. Daily routine.
   - F. Time available for learning the relaxation technique.
7. Select relaxation technique:
   - A. Aerobic exercise.
   - B. Autogenic training.
   - C. Biofeedback.
   - D. Deep breathing.
   - E. Meditation.
   - F. Mental imagery.
   - G. Progressive relaxation exercises.
   - H. Vestibular stimulation.
   - I. Communication skills.
   - J. Time management.
   - K. Laughter.
8. Provide modalities.
9. Direct patient in activity.
10. Observe patient's responses.
11. Alter activity or methods if necessary.
12. Motivate patient.
13. Provide instructions for patient's continuation of activities between therapy sessions.
14. Close therapy session.
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 86

TASK: Train patient in assertive behaviors.

STANDARD OF PERFORMANCE OF TASK:

Assertive techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's confidence, and be within the scope of patient's abilities and resources. Activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Gaming equipment
Group interaction
Patient's records
Dyadic interaction
Patient's support persons
Variety of environmental situations requiring assertive behaviors

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area:
   - A. Schedule appointment of other patients to overlap with selected patient.
   - B. Write script for role playing.
   - C. Arrange for travel to the community.
3. Escort patient to therapy area.
4. Note patient's conditions.
5. Identify situations in which the patient should be more assertive.
6. Select activities:
   - A. Role playing.
   - B. Defining appropriate behaviors/reactions.
   - C. Competitive games.
   - D. Lodging a complaint.
   - E. Requesting service.
   - F. Dyadic interaction.
   - G. Group interaction.

PERFORMANCE GUIDE: (cont.)

7. Direct patient in performance of activity:
    - A. Explain purpose of activity.
    - B. Review strategies for interaction.
    - C. Define expected outcomes.
      NOTE: Patient should be familiarized with individual members of a group prior to group activities.
    - D. Motivate patient.
8. Monitor patient's responses.
9. Give patient feedback:
    - A. Reinforce assertive behaviors.
    - B. Indicate specific areas in which improvement can be made.
    - C. Role play the part of the patient to exhibit how patient might have handled the situation more assertively.
10. Close therapy session.
11. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 87

TASK: Train patient in energy conservation techniques.

STANDARD OF PERFORMANCE OF TASK:

Recommended changes in patient's activities and/or environment must be in congruence with the patient's occupational therapy goals. Patient activities which would exceed the prescribed MET level must be discouraged. Education of patient, family and support persons must serve to increase patient's functional independence and safety. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Patient's adaptive equipment
Patient's home/work environment

PERFORMANCE GUIDE:

1. Review patient's records.
   NOTE: Identify patient's prescribed MET level.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's conditions.
5. Identify tasks that the patient desires to perform:
   A. Activities of daily living.
   B. Work/homemaking.
   C. Play/leisure.
      NOTE: Patient's family and support persons may be a source of information.
6. Devise schedule for daily routine that allows for adequate rest between tasks.
7. Identify tasks that the patient must avoid.
   NOTE: Patient's family/support persons may be required to take responsibility for some tasks.

PERFORMANCE GUIDE: (cont.)

8. Plan changes in patient's home/work environment:
    - A. Arrangement of tools and work aides.
    - B. Temperature control (avoid excessive heat).
    - C. Lighting.
    - D. Ambulation in, out, and within buildings.
    - E. Transfer equipment.
9. Educate patient and/or support person:
    - A. General cardiovascular system information.
    - B. Monitoring pulse and respiration.
    - C. Relaxation techniques.
    - D. Stress reduction:
        1. Avoiding activities after meals.
        2. Avoiding heat.
        3. Avoiding Valsalva maneuvers.
        4. Avoiding frustration.
10. Retrain patient in specific tasks:
    - A. Observe patient attempting/performing task.
    - B. Suggest changes in performance of task.
    - C. Suggest adaptive equipment.
    - D. Demonstrate performance of task using adaptive equipment and/or work simplification techniques.
11. Issue adaptive equipment or supplies.
12. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 88

TASK: Train patient in joint protection techniques.

STANDARD OF PERFORMANCE OF TASK:

Recommended changes in patient's activities and/or environment must be in congruence with the patient's occupational therapy goals. Joint damage and discomfort must be decreased and the patient's functional independence must be maximized through education of the patient, the family, and support persons. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Patient's adaptive equipment
Patient's home/work environment

PERFORMANCE GUIDE:

1. Review patient's records including patient's range of motion evaluation results.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's conditions.
5. Identify tasks that the patient desires to perform:
   A. Activities of daily living.
   B. Work/homemaking.
   C. Play/leisure.
      NOTE: Patient's family and support persons may be a source of information.
6. Schedule daily routine that allows for warm up of joints before tasks and adequate rest between tasks.
7. Identify tasks that the patient must avoid.
   NOTE: Patient's family may be required to assume responsibility of certain tasks.

PERFORMANCE GUIDE: (cont.)

8. Plan changes in patient's home/work environment:
    A. Arrangement of tools and work aids.
    B. Ambulation into and within buildings.
    C. Transfer equipment.
9. Educate patient and/or support person:
    A. General joint structure and function.
    B. Monitoring of swelling, redness and warmth.
    C. Range of motion exercises.
    D. Monitoring pain and altering activities when pain persists.
10. Retrain patient in specific tasks:
    A. Observe patient attempting/performing task.
    B. Suggest changes in performance of task.
    C. Suggest adaptive equipment.
    D. Demonstrate performance of task using adaptive equipment, work simplification techniques and/or use of larger joints.
11. Issue adaptive equipment or supplies.
    NOTE: Schedule a future appointment for servicing the adaptive equipment if needed.
12. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers
Willard and Spackman's occupational therapy

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 89

TASK: Train patient in use of public transportation.

STANDARD OF PERFORMANCE OF TASK:

The training activities performed must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the patient's abilities and resources. Patient's ability to reach desired destination safely and on time must be assessed. Injury must be avoided, and activities be modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Money
Telephone
Support persons
Patient's records
Public transportation systems
Functional ambulation devices
Functional communications devices/supplies
Public transportation systems schedules and cost information

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient and family/support persons to therapy area.
4. Note patient's condition.
5. Discuss with patient and/or support persons patient's public transportation needs.
6. Identify public transportation services available.
7. Identify specific skills training needed by patient:
    A. Money handling.
    B. Reading routing information.
    C. Reading scheduling information.
    D. Pedestrian travel conventions and safety.
    E. Recognition of street names and landmarks.
    F. Moving into, out of and within vehicles.

PERFORMANCE GUIDE: (cont.)

G. Planning transportation activities.
H. Communication of requests to public transportation operators.
I. Notification of public transportation managers for special arrangements.

8. Plan for training in specific skills:
   A. Skills training provided by occupation therapy assistant or aide.
   B. Skills training provided within school system.
   C. Skills training provided by family.
   D. Skills training provided by related services.
9. Train patient in specific skills using simulations.
10. Train patient in specific skills in real situations.
    NOTE: Prior knowledge of what patient will encounter in real situations is essential.
11. Follow up training activities assigned to other persons.
12. Evaluate patient's ability to reach desired destination utilizing public transportation.
13. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 90

TASK: Train patient in functional ambulation.

STANDARD OF PERFORMANCE OF TASK:

Ambulation activities must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities and resources. Activities must be coordinated with related services. Injury must be avoided and activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Supportive equipment
Ambulation equipment
Various surfaces (i.e., grass, gravel, carpet)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's ambulation needs.
3. Identify specific skills training needed by patient.
4. Coordinate patient's training with related services.
5. Train patient in specific skills.
6. Assist patient with:
   A. Ambulation equipment.
   B. Balance.
7. Monitor patient's:
   A. Physical stamina.
   B. Balance.
   C. Cognitive abilities (problem-solving, memory).
   D. Motivation equipment needs.

PERFORMANCE GUIDE: (cont.)

   E. Adaptive equipment needs.
   F. Safety awareness.
8. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 91

TASK: Train patient in transfer techniques.

STANDARD OF PERFORMANCE OF TASK:

Transfer techniques must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the patient's abilities and resources. Patient's ability to safely perform required transfers must be assessed. Injury must be avoided, and activities must be modified to best facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Other staff
Transfer belt
Support persons
Patient's records
Transfer surfaces

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Identify patient's transfer needs.
6. Assess patient's transfer abilities:
   NOTE: Patient must have adequate physical and cognitive abilities prior to training in transfer techniques.
   A. Observe patient.
   B. Question patient.
   C. Question other staff.
7. Instruct patient or support person in steps of a transfer.
   NOTE: Patient should be encouraged to perform as independently as possible.
   CAUTION: Review safety guidelines before and during instruction.

PERFORMANCE GUIDE: (cont.)

8. Assess patient's progress.
9. Modify activities.
10. Question patient and support person on transfer safety.
11. Close therapy session.
12. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 92

TASK: Train patient in wheelchair mobility.

STANDARD OF PERFORMANCE OF TASK:

Activities must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the patient's abilities and resources. Ambulation activities must be coordinated with related services. Injury must be avoided, and activities modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Wheelchair
Support persons
Patient's records
Positioning equipment/supplies

PERFORMANCE GUIDE:

1. Review patient's records.
2. Discuss with patient and/or support persons the patient's wheelchair mobility skills needs.
3. Identify specific skills training needed by patient:
   A. Adjustment of wheelchair accessories.
   B. Use of positioning equipment/supplies.
4. Train patient in specific skills.
   CAUTION: Question patient on step-by-step procedures prior to allowing patient to proceed.
5. Monitor patient's:
   A. Physical stamina.
   B. Balance.
   C. Safety awareness.
6. Identify activities to be performed by or with assistance from support persons.
7. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

PERFORMANCE OBJECTIVE NO. 93

TASK: Train patient in bed mobility.

STANDARD OF PERFORMANCE OF TASK:

The bed mobility techniques performed must be in congruence with the patient's occupational therapy goals, contribute to the patient's maximum functional independence and be within the scope of the patient's abilities. Injury must be avoided and activities modified to facilitate learning. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Other staff
Support persons
Patient's records

PERFORMANCE GUIDE:

1. Identify patient's bed mobility needs.
2. Assess patient's bed mobility abilities:
   A. Review patient's records.
   B. Observe patient.
   C. Question patient.
   D. Question other staff.
3. Instruct patient in steps of:
   NOTE: Patient should be encouraged to perform as independently as possible.
   A. Rolling side to side.
   B. Supine to sitting position.
   C. Sitting to supine position.
   D. Sitting on edge of bed.
4. Assess patient's progress.
5. Modify activities.
6. Question patient and support person on bed mobility safety.
7. Close therapy session.
8. Note responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 94

TASK: Engage patient in purposeful activities for fine and gross motor coordination.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Activities must be varied if formation of splinter skills is to avoided. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes.

CONDITIONS FOR PERFORMANCE OF TASK:

Games
Peg boards
Stop watch
Activity mat
School supplies
Stackable cones
Cooking supplies
Patient's records
Art/craft supplies
Sporting equipment
Body positioning games
Music/musical instruments/supplies and equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Greet patient.
4. Escort patient to therapy area.
5. Note patient's condition.
6. Discuss with patient/support persons:
    A. Purpose of fine and gross motor coordination.
    B. Responsibilities of patient/support persons.
    c. Procedures and expected outcomes.
7. Select specific purposeful activities:
    NOTE: Activities must be varied if formation of splinter skills is to be avoided.
    A. Body movement games.

PERFORMANCE GUIDE: (cont.)

        B. Adapted sports activities.
        C. Finger tapping.
        D. Arts/crafts.
        E. Object manipulation games.
        F. Dressing skills.
        G. Writing.
        H. Typing.
    8. Provide modalities.
    9. Direct patient in performance of activity:
        A. Demonstrate performance of activity.
        B. Position patient.
        C. Provide cueing.
        CAUTION: Patient's performance of potentially dangerous activities must be closely supervised.
    10. Observe patient's abilities.
        NOTE: Patient's lack of ability may be due to conditions other than motor coordination deficits (attention span, endurance).
    11. Give feedback to patient.
    12. Alter activity or methods.
    13. Reinforce/extinguish behaviors.
    14. Motivate patient.
    15. Repeat steps 6-13 for each activity.
    16. Close therapy session.
    17. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 95

TASK: Engage patient in purposeful activities for strength.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Patient must be instructed to rest as needed and encouraged to perform to the limits of their abilities. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Weights
Arm skate
Peg boards
Bolt boards
Activity mat
Stackable cones
Sports equipment
Patient's records
Ambulation equipment
Supportive equipment
Arts/crafts supplies
Active assistive equipment
Resistive exercise equipment
Inclined plane/tilting table

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
   A. Adapted sports activities.
   B. Arts/crafts activities.
   C. Stacking cones.

PERFORMANCE GUIDE: (cont.)

   - D. Peg boards.
   - E. Weight/bearing activities.
   - F. Gravity eliminated/reduced activities.
   - G. Graded resistance activities (i.e., thera-putty, thera-bands).

6. Inform patient of activity.
7. Provide modalities.
8. Direct patient in performance of activity:
   - A. Demonstrate performance of activity.
   - B. Position patient.
   - C. Provide cueing.

     NOTE: Patient may require much encouragement to overcome fatigue.

     CAUTION: Patient performing potentially dangerous activities must be closely supervised.
9. Observe patient's responses.

   NOTE: Patient must be instructed to rest as needed.

   CAUTION: Cardiac patient must work within MET level as prescribed by a physician.
10. Give patient feedback.
11. Alter activity or methods.
12. Reinforce/extinguish behaviors.
13. Motivate patient.
14. Repeat steps 6-13 for each activity.
15. Close therapy session.
16. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 96

TASK: Engage patient in purposeful activities for endurance.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Patients must be instructed to rest as needed and encourage to perform to their limits of their abilities. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Treadmill
Peg boards
Bolt boards
Activity mat
Music (dancing)
Sports equipment
Patient's records
Ambulation equipment
Arts/crafts supplies
Resistive exercise equipment

PERFORMANCE GUIDE:

1. Review patient's records.
   CAUTION: Physician's or other specialists' recommendation for limits of activity must be followed.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
   A. Adapted sports activities.
   B. Dancing.
   C. Arts/Crafts activities.
   D. Weighted exercises.
   E. Gravity eliminated/reduced exercises.
   D. Graded resistance exercises.

PERFORMANCE GUIDE: (cont.)

6. Inform patient of activity.
7. Provide modalities.
8. Direct patient in performance of activity:
   - A. Demonstrate performance of activity.
   - B. Position patient.
   - C. Provide cueing.

     NOTE: Patients must be instructed to indicate when they begin to reach the limits of their endurance.

     CAUTION: If patients lack ability or motivation to indicate when they begin to reach the limits of their endurance, alternative communication methods must be established.
9. Observe patient's responses.

   NOTE: Patient must be instructed to rest as needed.
10. Give patient feedback.

    NOTE: Patient may require a great deal of encouragement as they reach the limits of their endurance.
11. Alter activity or methods.
12. Reinforce/extinguish behaviors.
13. Motivate patient.
14. Repeat steps 6-13 for each activity.
15. Close therapy session.
16. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 97

TASK: Engage patient in purposeful activities for range of motion.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Normal range of motion must not be exceeded. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Puzzles
Peg boards
Activity mat
Sports equipment
Patient's records
Arts/crafts equipment/supplies

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient conditions.
5. Select specific purposeful activities:
   A. Adapted sports activities.
   B. Arts/crafts activities.
   C. Peg boards.
   D. Puzzles.
   E. Weaving.
6. Inform patient of activity.
7. Provide modalities.
8. Direct patient in performance of activity:
   A. Demonstrate performance of activity.
   B. Position patient.

PERFORMANCE GUIDE: (cont.)

C. Provide cueing.
NOTE: Instruct patient to indicate at what point in joint movement pain occurs.
CAUTION: If patient lacks ability or motivation to indicate pain, alternative communication methods must be established.

9. Observe patient's responses.
NOTE: Activity must be performed daily or several times a day to affect an increase in range of motion.
10. Give patient feedback.
NOTE: Inform patient of expected results (pain/no pain, rate of progress).
11. Alter activity or methods.
12. Reinforce/extinguish behaviors.
13. Motivate patient.
14. Repeat steps 6-13 for each activity.
15. Close therapy session.
16. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 98

TASK: Engage patient in purposeful activities for reflex integration.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Parasympathetic nervous system reactions must be avoided. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Hammock
Bean bags
Activity mat
Strap-on weights
Textured materials
Controlled environment
Vestibular stimulation equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
   NOTE: Patient and/or support person should be informed in advance that eating just prior to activity session should be avoided.
5. Select specific therapeutic activities:
   A. Primitive reflex inhibition.
   B. Spasticity inhibition.
   C. Muscle stimulation.
   D. Facilitation of righting reactions.
   E. Facilitation of protective extension.
   F. Facilitation of equilibrium reactions.
6. Inform patient of activity.
7. Provide modalities.

PERFORMANCE GUIDE: (cont.)

8. Direct patient in performance of activity:
   A. Demonstrate performance of activity.
   B. Position patient.
   C. Provide cueing.
9. Observe patient responses.
   NOTE: Indications of parasympathetic nervous system activity must be monitored. Blanching, flashing, nausea, excessive yawning, excessive perspiration and/or prolonged nystagmus require that the activity be stopped.
10. Give patient feedback.
11. Alter activity or methods.
12. Reinforce/extinguish behaviors.
13. Motivate patient.
14. Repeat steps 6-13 for each activity.
15. Close therapy session.
    NOTE: Inform support persons of possible effects of activities (i.e., nightmares, tiredness).
16. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 99

TASK: Engage patient in purposeful activities for sensory awareness.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Parasympathetic nervous system reactions must be avoided. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Blankets
Activity mat
Strap on weights
Screen or curtain
Patient's records
Various herbs and spices
Visual stimulatory aides
Tactile stimulatory aides
Auditory stimulatory aides
Olfactory stimulatory aides
Gustatory stimulatory aides
Vestibular stimulation equipment
Room in which the degree of visual and auditory stimulation can be regulated

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
   A. Tactile or touch activities.
   B. Olfactory activities.

PERFORMANCE GUIDE: (cont.)

CAUTION: Do not use dangerous smells.
    C. Vestibular activities.
    D. Auditory activities.
    E. Visual activities.
6. Inform patient of activity.
7. Direct patient in performance of activity:
    A. Demonstrate performance of activity.
    B. Position patient.
    C. Provide cueing.
8. Observe patient's responses.
    CAUTION: Indications of parasympathetic nervous system activity must be monitored. Blanching, flashing, nausea, excessive yawning, excessive perspiration and/or prolonged nystagmus require that the activity be stopped.
9. Give patient feedback.
    NOTE: Mood changes associated with sensory defensiveness may require constant reassurance to the patient.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Repeat steps 6-12 for each activity.
14. Close therapy session.
    NOTE: Inform support persons of possible effects of activities (i.e., nightmares, tiredness).
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 100

TASK: Engage patient in purposeful activities for sensory motor integration.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Parasympathetic nervous system reactions must be avoided. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Vibrator
Activity mat
Strap-on weights
Patient's records
Vestibular stimulation equipment
Various textured samples of cloth, plastic, sandpaper, fur, foil, creams and/or lotions

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
    A. Tactile or touch activities.
    B. Vestibular stimulation games.
    C. Proprioceptor sensory input.
    D. Adaptive motor responses.
    E. Bilateral integration.
    F. Motor planning.
6. Inform patient of activity.
7. Direct patient in performance of activity.

PERFORMANCE GUIDE (cont.)

8. Observe patient's responses.
   CAUTION: Indications of parasympathetic nervous system activity must be monitored. Blanching, flashing, nausea, excessive yawning, excessive perspiration and/or prolonged nystagmus require that the activity be stopped.
9. Give patient feedback.
   NOTE: Mood changes associated with sensory defensiveness may require constant reassurance to the patient.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Repeat steps 6-12 for each activity.
14. Close therapy session.
    NOTE: Inform support persons of possible effects of activities (i.e., nightmares, tiredness).
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 101

TASK: Engage patient in purposeful activities for visual perception.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Patient must wear corrective lenses if prescribed. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Puzzles
Patient's records
Arts/crafts supplies
Sports or playground equipment
Vestibular stimulation equipment
Blocks (geometric shapes or parquetry)
Two- and three-dimensional representation of common objects

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
    A. Vestibular stimulation games.
    B. Matching two-dimensional representations to three-dimensional objects.
    C. Sorting objects.
    D. Gross-motor activities.
    E. Eye-hand activities.
    F. Figure-ground perception activities.
6. Inform patient of activity.

PERFORMANCE GUIDE (cont.)

7. Direct patient in performance of activity:
    - A. Demonstrate performance of activity.
    - B. Position patient.
    - C. Provide cueing.
8. Observe patient's responses.
9. Give patient feedback.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Repeat steps 6-12 for each activity.
14. Close therapy session.
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 102

TASK: Engage patient in purposeful activities for body awareness.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Mirror
Activity mat
Tactile items
Patient's records
Body identification devices
Vestibular stimulation equipment

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
    A. Body movement games.
    B. Body parts identification games.
    C. Human body puzzles.
    D. Identification of body parts while looking in a mirror.
    E. Mimicries/pantomime.
    F. Tactile/kinesthetic.
6. Inform patient of activity.
7. Direct patient in performance of activity:
    A. Demonstrate performance of activity.
    B. Position patient.
    C. Provide cueing.
8. Observe patient's responses.

PERFORMANCE GUIDE (cont.)

9. Give patient feedback.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Repeat steps 6-12 for each activity.
14. Close therapy session.
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 103

TASK: Engage patient in purposeful activities for cognitive skills.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. The activities must challenge the patient's cognitive abilities. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justified according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Games
Puzzles
Worksheets
Items used on ADL
Patient's records
Art/craft supplies
Computer software games
Reality orientation groups

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
   A. Reality orientation.
   B. Puzzles.
   C. Memory games.
   D. Strategic games.
   E. Sequencing
   F. Functional tasks (i.e., telephone, emergency response system).
6. Inform patient of activity.
7. Direct patient in performance of activity:
   A. Demonstrate performance of activity.
   B. Question patient.
   C. Provide cueing.

PERFORMANCE GUIDE (cont.)

8. Observe patient's responses.
9. Give patient feedback.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Repeat steps 6-12 for each activity.
14. Close therapy session.
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 104

TASK: Engage patient in purposeful activities for cognitive integration skills.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. The activities must challenge the patient's cognitive abilities. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Various related and unrelated objects
Various situations requiring decision making

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Select specific purposeful activities:
    A. Classification of objects.
    B. Decision making.
    C. Safety awareness.
6. Inform patient of activity.
7. Direct patient in performance of activity:
    A. Demonstrate performance of activity.
    B. Question patient.
    C. Provide cueing.
8. Observe patient responses.
9. Give patient feedback.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.

PERFORMANCE GUIDE: (cont.)

12. Motivate patient.
13. Repeat steps 6-12 for each activity.
14. Close therapy session.
15. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 105

TASK: Engage patient in purposeful activities for self-concept.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. The therapy environment including interaction with other patients and/or support persons must be conducive to a positive patient self-concept. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Mirror
Concern
Attention
Affection
Self portrait
Support persons
Patient's records
Group interaction
Positive attitude
Art/craft supplies
Dyadic interaction
Cultural artifacts
Interest inventories
Functional communication devices

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
   NOTE: Showing interest in the patient and concern for the patient is important.
4. Note patient's condition.

PERFORMANCE GUIDE: (cont.)

5. Select specific purposeful activities:
   NOTE: Patient's strengths should be identified and activities selected to make patient aware of those strengths.
   A. Arts, crafts (self portrait).
   B. Discovery, classifications.
   C. Project requiring group participation.
      NOTE: Patient should be familiarized with other members of the group prior to group interaction.
      CAUTION: If group responds negatively, the activity should be discontinued.
   D. Music.
   E. Dance.
   F. Drama.
   G. Discussion groups.
      NOTE: Definition of patient's self-concept may be facilitated by having the patient select the activity or role in the activity if the patient can handle decision making.
6. Inform patient of activity.
   NOTE: Patient may be asked to express likes and dislikes regarding the activity.
7. Direct patient in performance of activity.
   A. Define patient's role in group.
   B. Assign or allow patient to choose a partner.
   C. Designate sole responsibility for an activity to the patient.
   D. Demonstrate performance of activity.
      NOTE: Allow patient to be creative in methods and products.
   E. Provide cueing.
      NOTE: Discovery activities require objects or events to create interest.
      CAUTION: Patient may need to be introduced to group interaction in gradual steps.
8. Observe patient's responses:
   NOTE: Any response is better than no response.
   A. Expresses explorative behavior.
   B. Expresses appreciation of beauty.
   C. Expresses likes, dislikes, interests, fears.
   D. Acts as leader, follower.
   E. Defines appropriate behavior.
   F. Displays self-concept through dance or drama.

PERFORMANCE GUIDE: (cont.)

9. Give patient feedback.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Close therapy session.
14. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 106

TASK: Engage patient in purposeful activities for situational coping skills.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. The patient's ability to cope must be challenged but not overwhelmed. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Merchants
Role playing
Salespersons
Patient's records
Group interaction
Art/craft supplies
Dyadic interaction
Community services personnel

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
   NOTE: Notify agency staff if patient is being taken into the community for exposure to realistic stimuli.
4. Note patient's condition.
5. Select specific purposeful activities:
   A. Requesting service (shopping, dinning out).
   B. Money, time management.
   C. Family crisis.
   D. Resource persons.
   E. Transportation.
   F. Dating.
   G. Denial of feelings.
   H. Incompatibility (personality) in housing.
   I. Institutionalization.

PERFORMANCE GUIDE: (cont.)

- J. Refusals of requests.
- K. Recognition of danger.
- L. Strategic games.
- M. Group decisions.
  - NOTE: Patient's abilities must be challenged; however, take care not to overwhelm the patient.
  - CAUTION: Look for clues that patient is being overwhelmed, (i.e., crying, anger, teeth clenching, shaking, rocking, biting finger nails, avoidance, staring).

6. Inform patient of activity:
   - A. Objectives of activity.
   - B. Impediments for attainment of activity.
   - C. Allowable methods toward attainment.
     - NOTE: Patient's maladapted situational coping behaviors must be discouraged.
7. Direct patient in performance of activity:
   - A. Present patient with problem.
   - B. Reinforce appropriate coping strategies.
   - C. Present alternative behaviors for maladapted behaviors.
   - D. Provide cueing.
   - E. Give patient feedback.
8. Alter activity or methods.
9. Motivate patient.
10. Close therapy session.
11. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 107

TASK: Engage patient in purposeful activities for community involvement.

STANDARD OF PERFORMANCE OF TASK:

Purposeful activities must be in congruence with the patient's occupational therapy goals. Patient must be advised of special circumstances (rules) applicable to each community setting. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Farm/zoo
Theater
Fairs/circus
Art exhibits
Special Olympics
Group interaction
Dyadic interaction
Department/grocery stores
Short-term/long-term projects
Post office/community business establishments
Community events (sporting, shows, holiday shopping)
Community resources (transportation, sheltered workshops)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
   NOTE: Community facilities should be visited prior to activity to determine accessibility and to arrange the activity with the management.
3. Instruct group members or helpers as to their role in activity.

PERFORMANCE GUIDE: (cont.)

4. Escort patient to therapy area.
   NOTE: Staff must be familiar with patient prior to exposing patient to community experience.
   NOTE: Notify agency staff if patient is traveling to facilitate community involvement.
5. Note patient's condition.
6. Select specific purposeful activities:
   A. Group projects.
   B. Cultural awareness.
   C. Special events.
   D. Community organization meetings.
   E. Home and work social interaction.
   F. Educational activities.
   G. Explore resources available.
   H. Career exploration.
   I. Religious meeting.
7. Inform patient of activity.
8. Direct group activity:
   NOTE: Patient should be familiarized with other members of the group prior to group interaction.
   A. Encourage group interaction.
   B. Define or facilitate definition of group objectives.
   C. Monitor group interaction.
9. Introduce patient to community resources/events:
   NOTE: Make sure patient are aware of special circumstances (i.e., littering, don't touch the art work, farm/zoo safety).
   CAUTION: Staff persons should have a plan of action for anything that could go wrong (i.e., if person is lost, injured).
   A. Explain purpose of resources/events.
   B. Encourage use of resources.
   C. Encourage participation in events.
   D. Ask patient for feedback regarding activity.
10. Alter activity or methods.
11. Reinforce/extinguish behaviors.
12. Motivate patient.
13. Close therapy session.
14. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 108

TASK: Supervise exercises in visual tracking.

STANDARD OF PERFORMANCE OF TASK:

Visual tracking activities must be in congruence with the patient's occupational therapy goals. Corrective lenses must be worn if prescribed. Activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Target object
Patient's records
Controlled environment (light, visual stimulation)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
   NOTE: The environment of the therapy area will depend on the therapeutic technique(s).
3. Escort patient to therapy area.
4. Note patient's condition.
   NOTE: Patients who wear glasses/contacts should wear them during the treatment.
5. Instruct patient in steps of the visual tracking activities:
   A. Stationary.
   B. Moving:
      1. Horizontal/vertical.
      2. Quick/slow.
6. Observe patient's responses or abilities.
7. Modify activity.
8. Reinforce or extinguish behaviors.
9. Close therapy session.
10. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: *IMPLEMENTING THERAPEUTIC MEASURES*

PERFORMANCE OBJECTIVE NO. 109

TASK: Supervise exercises in range of motion.

STANDARD OF PERFORMANCE OF TASK:

The range-of-motion exercises must be in congruence with the patient's occupational therapy goals. Normal range of motion must not be exceeded. The exercises must be altered to accommodate the patient's level of performance, and changes in the exercise must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Mirror
Peg boards
Deltoid aid
Shoulder wheel
Stackable cones
Patient's records

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient conditions.
5. Discuss with patient/support persons:
   A. Purpose of range-of-motion.
   B. Responsibilities of patient/support persons.
   C. Training procedures and expected outcomes.
6. Select patient's degree of activity in range-of motion exercises:
   A. Active.
   B. Passive.
   C. Active-assist.
   D. Resistive.
7. Select active range-of-motion exercises.
   NOTE: Stretching tissue after it has been immobilized must be done carefully.

PERFORMANCE GUIDE: (cont.)

8. Select passive range-of-motion exercises:
    - A. Exercises facilitated by equipment.
    - B. Bilateral activities using affected and unaffected extremities.
    - C. Exercises facilitated by the occupational therapy assistant, aide, or support person.
9. Select active-assist range-of-motion exercises:
    - A. Exercises assisted by equipment.
    - B. Exercises assisted by the occupational therapy assistant or aide.
10. Provide instructions in range of motion exercises:
    - A. Provide verbal instructions.
    - B. Demonstrate exercises.
    - C. Position patient.
    - D. Refer to previously learned exercises.
    - E. Assist with range of motion.
    - F. Facilitate range of motion.
11. Instruct patient to perform the selected range of motion activities.

    NOTE: Range of motion activities must be performed several times a day to affect increase in range of motion.
12. Measure range attained.
13. Observe patient's responses.

    NOTE: Instruct patient to indicate at what point in the joint movement pain occurs.
14. Provide feedback on patient's performance.

    NOTE: Inform patient that pain is associated with improved range of motion.
15. Time/count exercises.
16. Tell patient when to rest.
17. Review patient's performance with patient.
18. Reward participation.
19. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 110

TASK: Supervise work hardening activities.

STANDARD OF PERFORMANCE OF TASK:

Work hardening activities must be in congruence with the patient's occupational therapy goals and simulate or duplicate the patient's work activities. Patient's work abilities must be challenged. Patient's safety must be assured, the activities must be altered to accommodate the patient's level of performance, and changes in activities must be justifiable according to the progress notes. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Weights
Bolt boards
Thera-putty
Thera-bands
Patient's records
Hand helper exerciser
Exercise bike and rowing machine
Tools, equipment and materials specifically related to patient's work activities

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Identify work activities to be performed by patient.
6. Select work activity simulations:
   A. Weights.
   B. Bolt boards.
   C. Graded resistance exercises.
   D. Hand helper exerciser.

PERFORMANCE GUIDE (cont.)

7. Select real work activities:
    - A. Lifting, carrying, and stacking boxes, buckets or concrete blocks.
    - B. Disassemble and reassemble.
    - C. Operation of machines.

      NOTE: Employer may be a source of materials and equipment.
8. Set performance standards for selected activities (i.e., time limits, accuracy).
9. Administer modalities.
10. Direct patient in performance of activity.
11. Observe patient's responses.

    NOTE: Patient must be instructed to rest as needed.

    CAUTION: Cardiac patient must work within MET level as prescribed by physician.
12. Give patient feedback and suggestions for:
    - A. Body positioning.
    - B. Body mechanics.
    - C. Joint protection.
    - D. Arrangement of work environment.

      NOTE: Patients may require a great deal of encouragement as they reach the limits of their strength and endurance.
13. Alter activities if needed.
14. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 111

TASK: Train patient in use of orthosis.

STANDARD OF PERFORMANCE OF TASK:

Orthosis training activities must be in congruence with the patient's occupational therapy goals and orthosis prescription. The patient's comprehension and performance must be assessed and the activities altered to accommodate the patient's level of comprehension and performance. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Pinch meter
Patient's records
Grasp dynomometer
Patient's support persons
Orthotic adjustment tools
Patient's orthotic devices
Objects of various sizes, weights, and textures to be manipulated.

PERFORMANCE GUIDE:

1. Review patient's records including:
    - A. Orthotic prescription.
    - B. Previous training in use of orthotic device.
    - C. Degree that support persons are available to assist patient.
    - D. Patient's learning abilities.
2. Secure additional patient information from practitioner who has made or ordered the orthosis.
3. Ensure that the patient will bring orthosis to the scheduled appointment.
4. Prepare therapy area.
5. Escort patient to therapy area.
6. Note patient's condition.
7. Discuss with patient/support persons:
    - A. Purpose of orthosis.
    - B. Responsibilities of patient/support persons.
    - C. Training procedures and expected outcomes.

PERFORMANCE GUIDE: (cont.)

8. Inspect the mechanical condition of the orthosis.
9. Inspect the fit of the orthosis.
   NOTE: Patient/support persons can provide information regarding fit of the orthosis.
10. Instruct patient in the names/purpose of the parts of the orthosis.
11. Instruct patient in the care of the orthosis.
    NOTE: Provide the patient with written instructions for care of the orthosis as needed.
    NOTE: Care and protection of the orthosis must be emphasized.
12. Instruct patient on how to put on and remove the orthosis.
    NOTE: Patient's ability to quickly put on and remove the orthosis will facilitate acceptance of the orthosis.
13. Instruct patient on how to control the orthosis.
14. Direct patient on manipulation of objects.
    NOTE: Objects must vary in size, weight and texture.
15. Modify or suggest changes in the patient's home/work environment.
16. Act to influence the patient's acceptance of the orthosis:
    - A. Improve the appearance of the orthosis.
    - B. Improve the comfort/wearability of the orthosis.
    - C. Point out increased functional capabilities and independence to be gained through the use of the orthosis.
17. Inform patient of orthosis wearing schedule.
    NOTE: Provide the patient with a written copy of the schedule as needed.
18. Assess the patient's/support person's comprehension of the training.
19. Evaluate patient's pinch and grip strength.
20. Schedule follow-up session if needed.
21. Close the therapy session.
22. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 112

TASK: Train patient in use of prosthesis.

STANDARD OF PERFORMANCE OF TASK:

Prosthesis training activities must be in congruence with the patient's occupational therapy goals and prostheses prescription. The patient's comprehension and performance must be assessed and the activities altered to accommodate the patient's level of comprehension and performance. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Pinch meter
Patient's records
Grasp dynamometer
Patient's support persons
Prosthetic adjustment tools
Patient's prosthetic devices
Objects of various sizes, weights, and textures to be manipulated

PERFORMANCE GUIDE:

1. Review patient's records including:
   A. Prosthetic prescription.
   B. Previous training in use of prosthetic device.
   C. Degree that support persons are available to assist patient.
   D. Patient's learning abilities.
2. Secure additional patient information from practitioner who has made or ordered the prosthesis.
3. Ensure that the patient will bring prosthesis to the scheduled appointment.
4. Prepare therapy area.
5. Escort patient to therapy area.
6. Note patient's condition.
7. Greet patient.
8. Discuss with patient/support persons:
   A. Purpose of prosthesis.

PERFORMANCE GUIDE: (cont.)

B. Responsibilities of patient/support persons.
C. Training procedures and expected outcomes.

9. Inspect the mechanical condition of the prostheses.
10. Inspect the fit of the prostheses.
    NOTE: Patient/support persons can provide information regarding fit of the prostheses.
11. Instruct patient in the names/purpose of the parts of the prostheses.
12. Instruct patient in the care of the prostheses.
    NOTE: You may need to provide the patient with a written instructions for care of the prostheses.
    NOTE: Care and protection of the prostheses must be emphasized.
13. Instruct patient on how to put on and remove the prostheses.
    NOTE: Patient's ability to quickly put on and remove the prostheses will facilitate acceptance of the prostheses.
14. Instruct patient in how to control the prostheses.
15. Direct patient on manipulation of objects.
    NOTE: Objects must vary in size, weight and texture.
16. Modify or suggest changes in the patient's home/work environment.
17. Influence the patient's acceptance of the prostheses:
    A. Improve the appearance of the prostheses.
    B. Improve the comfort/wearability of the prostheses.
    C. Point out increased functional capabilities and independence to be gained through the use of the prostheses.
18. Inform patient of prostheses wearing schedule.
    NOTE: Provide the patient with a written copy of the schedule as needed.
19. Evaluate patient's pinch and grip strength.
20. Schedule follow-up session if needed.
21. Assess the patient's/support person's comprehension of the training.
22. Close the therapy session.
23. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 113

TASK: Train patient in use of adaptive equipment.

STANDARD OF PERFORMANCE OF TASK:

The adaptive equipment training activities must be in congruence with the patient's occupational therapy goals and prescription. The patient's comprehension and performance must be assessed, and the activities altered to accommodate the patient's level of comprehension and performance. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Patient's support persons
Patient's adaptive equipment
Adaptive equipment adjustment tools
Objects of various sizes, weights, and textures to be manipulated

PERFORMANCE GUIDE:

1. Review patient's records including:
   A. Previous training in use of adaptive equipment.
   C. Degree that support persons are available to assist patient.
   D. Patient's learning abilities.
2. Ensure that the patient will bring adaptive equipment to the scheduled appointment.
3. Prepare therapy area.
4. Greet patient.
5. Escort patient to therapy area.
6. Note patient conditions.
7. Discuss with patient/support persons:
   A. Purpose of adaptive equipment.
   B. Responsibilities of patient/support persons.
   C. Training procedures and expected outcomes.
8. Inspect the mechanical condition of the adaptive equipment.
9. Instruct patient in the names/purpose of the parts of the adaptive equipment.

PERFORMANCE GUIDE: (cont.)

10. Instruct patient in the care of the adaptive equipment.
    NOTE: Care and protection of the prostheses must be emphasized.
11. Instruct patient on how to set up the adaptive equipment.
12. Instruct patient on how to operate the adaptive equipment.
13. Direct patient on manipulation of objects.
    NOTE: Objects must vary in size, weight and texture.
14. Modify or suggest changes in the patient's home/work environment.
15. Influence the patient's acceptance of the adaptive equipment.
16. Schedule follow-up session if needed.
17. Assess the patient/support person's comprehension of the training.
18. Close the therapy session.
19. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 114

TASK: Retrain patient in hand dominance.

STANDARD OF PERFORMANCE OF TASK:

Activities must be in congruence with the patient's occupational therapy goals. Patient's deficiencies in performance of tasks must be addressed with specific strategies. The patient's abilities must be continuously assessed and activities altered to challenge the patient's abilities. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Games
Balls
Puzzles
Thera-putty
Pinch meter
Rubber bands
Darts, target
Playing cards
Patient's records
Grasp dynamometer
Art/craft supplies
Clothing (buttons, zippers)
Activities of daily living devices and supplies

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
4. Note patient's condition.
5. Identify activities that are of interest to the patient.
6. Analyze tasks that the patient must perform.
7. Direct patient in activity with suggestions for changes in methodology.
8. Engage patient in activities that challenge the patient's current level of coordination and dexterity.

PERFORMANCE GUIDE: (cont.)

9. Assess patient's abilities on a continuous basis:
    - A. Size of objects that can be manipulated.
    - B. Speed at which objects can be manipulated.
    - C. Strength.
    - D. Endurance.
10. Alter activities to continuously challenge patient's abilities.
11. Note patient's responses to activities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 115

TASK: Design system of positive and negative reinforcement.

STANDARD OF PERFORMANCE OF TASK:

The selected reinforcement strategy must be within the department standards for ethical conduct, be comprehensible by the patient, be practical considering the department resources and approximate reinforcement the patient will encounter from society in general. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patient's records
Department standards
Occupational therapy journals
Occupational therapy resource books

PERFORMANCE GUIDE:

1. Identify factors influencing patient's motivation:
   NOTE: Support persons can be a source of information.
   A. Internal standards.
   B. External standards.
   C. Basic needs.
   D. Anxiety.
   E. Delirium.
   F. Past experiences.
   G. Interests.
2. Identify patient's level of functioning:
   A. Cognitive.
   B. Neuro-motor.
   C. Basic needs.
   D. Anxiety.
   E. Stress.
3. Identify behaviors to be reinforced.
4. Identify behaviors that are not to be reinforced.

PERFORMANCE GUIDE: (cont.)

5. Select positive reinforcements:
    - A. Material rewards.
    - B. Praise (verbal).
    - C. Physical contact.
    - D. Attention.
    - E. Allowing patient to choose activity.
    - F. Edibles.
      CAUTION: Check patient's records for allergies or other dietary restrictions.
6. Select negative reinforcements:
    - A. Denial of material goods.
    - B. Reprimanding (verbal).
    - C. Physical contact.
    - D. Ignoring.
    - E. Timeout.
7. Plan strategy for implementation of reinforcement:
    - A. Contests.
    - B. Alternatives to confrontation (i.e. patient is able to alter behavior without humiliation).
    - C. Informing patient of the results of appropriate and/or inappropriate behavior.
      NOTE: Patient should always be informed of the exact reason why they are receiving the particular reinforcement.
      CAUTION: Patient can be very creative in regards to manipulation of circumstances which provide excuses for lack of appropriate behavior.
8. Review reinforcement strategy with supervisor.
9. Note patient's responses to activities.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy in mental retardation

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 116

TASK: Provide supportive listening.

STANDARD OF PERFORMANCE OF TASK:

The patient must be encouraged to believe that the occupational therapy assistant or aide is interested in the patient's well-being. Advice given to patient must be in congruence with the patient's occupational therapy goals. Patient's responses must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient
Patient's records
Patient's family/support persons

PERFORMANCE GUIDE:

1. Review patient's records to identify the patient's:
   A. Work activities/interests.
   B. Leisure activities/interests.
   C. Relationships with family/significant others.
   D. Recent achievements/disappointments.
2. Collect patient information from:
   A. Patient's family/support persons.
   B. Other staff.
   C. Patient.
3. Greet patient.
4. Encourage patient to discuss:
   A. Interests.
   B. Goals.
   C. Fears.
   D. Feelings.
5. Provide feedback to patient.
   A. Ask questions for elaboration of patient's interests.
   B. Help patient define reasonable goals.
   C. Provide information to help quell patient's fears.

PERFORMANCE GUIDE: (cont.)

D. Empathize with patient's feelings.
NOTE: Citing an example of a person, even yourself, that was in a situation similar to the patient's situation, including the actions taken and the results, may help patients feel that you understand their situation.
CAUTION: Inappropriate patient behavior, including action intended to evoke you to anger, must be discouraged.

6. Note patient's comments for reference in future interaction with patient.
NOTE: Notes should be written after patient has left the area if an informal atmosphere is desired.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 117

TASK: Provide supportive environment with increasing stimulation.

STANDARD OF PERFORMANCE OF TASK:

The activities must be in congruence with the patient's occupational therapy goals. The patient must be allowed to participate in selection of the activity and be prepared for the activity. Patient's emotional state must be monitored, and activities must be altered to avoid overwhelming the patient. Patient's responses must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Dyadic interaction
Group interaction
Situations with varying degrees of stimulation (i.e., quiet room, open therapy area, day room, shopping mall)

PERFORMANCE GUIDE:

1. Review patient's records.
2. Prepare therapy area.
3. Escort patient to therapy area.
   NOTE: Patient's trust is essential and may be facilitated by helping patients overcome difficulties they encounter day to day but cannot be forced.
4. Note patient conditions.
5. Select activities:
   NOTE: Consider patient's interests, fears, past experiences and familiarity with the environment and persons associated with the activity.
   CAUTION: Activities that overwhelm the patient will work counter to established goals.
   A. Increase visual and auditory stimulation in the patient's home environment.
   B. Meet and interact with individuals.

PERFORMANCE GUIDE: (cont.)

- C. Meet and interact with groups.
  CAUTION: Patient should be introduced to members of the group individually prior to involvement in group activities.
- D. Appointments with barber, beautician or health care professionals.
- E. Shopping.
- F. Dining in restaurant.
- G. Participation in community events.

6. Arrange activity:
   - A. Schedule use of area or equipment.
   - B. Schedule appointments.
   - C. Schedule transportation.
   - D. Evaluate accessibility of buildings.
   - E. Devise plan of action for anything that could go wrong.
   - F. Review activity with persons assisting in the activity.
7. Prepare patient for activity:
   NOTE: System of communications must be established.
   - A. Discuss patient's feelings about activity.
   - B. Inform patient of what can be expected during activity.
   - C. Assure patient that you will be present for support.
   - D. Display enthusiasm about the activity.
   - E. Introduce patient to individuals who will be involved in the activity.
8. Conduct the activity.
9. Review with the patient their feelings about the activity.
10. Note patient's responses and abilities.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 118

TASK: Assess reality orientation and reorient patient.

STANDARD OF PERFORMANCE OF TASK:

The level of the questions asked and information provided should reflect the patient's abilities. Orientation activities must be stopped if patient becomes frustrated. Notes should indicate specific orientation abilities. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Activities that patient has previously performed
Persons who have had interaction with the patient
Surroundings to which patient has previously been exposed
Objects to which patient has been previously exposed

PERFORMANCE GUIDE:

1. Question patient on a variety of situations (i.e. person, place, time).
2. Provide information to patient:
   - A. Visual cues.
   - B. Verbal cues.
3. Assess patient's knowledge of information.
4. Note specific information that was recalled or circumstances of which the patient was aware.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 119

TASK: Conduct group activities.

STANDARD OF PERFORMANCE OF TASK:

The selection of patients and activities must be in congruence with the patients' occupational therapy goals. Individual patients must be integrated into group at a rate that they can tolerate, and group activities must be altered to accommodate patients' responses. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Support persons
Patients' records
Activity which can be performed by a group
Involved staff persons (eg., nurse, teacher)

PERFORMANCE GUIDE:

1. Identify the purpose of forming the group.
2. Identify group formation parameters:
   - A. Size.
   - B. Structure.
   - C. Goals.
   - D. Membership criteria.
3. Identify patients who could benefit from being a member of a group.
4. Review records of patient considered for the group:
   - A. Past/present group participation.
   - B. Positive/negative personnel interactions.
   - C. Interests.
   - D. Needs.
   - E. Availability.
5. Collect additional character information regarding the suitability of each patient considered from:
   - A. Patient's family.
   - B. Patient's teacher.
   - C. Nursing staff.
   - D. Related services staff.

PERFORMANCE GUIDE: (cont.)

6. Meet with each patient considered for the group:
    - A. Build rapport with the patient.
    - B. Inquire about patient's desire/reluctance regarding participation in the group.
    - C. Motivate patient toward participation in the group.
      NOTE: Patients who are lacking in group interaction skills may require a slow introduction to the group.
7. Select activity for group.
8. Prepare area for group activity.
9. Escort patients to therapy area.
10. Introduce patient to each other as much as possible.
11. Interact with group when necessary.
12. Note patient's responses to activities.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy in mental retardation

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 120

TASK: Identify role models.

STANDARD OF PERFORMANCE OF TASK:

Persons selected for role models must possess desired attitude or display desired behavior. Patient's feeling towards selected person must be neutral or positive. Patient's responses and abilities must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Other staff
Other patients
Persons from patient's environment

PERFORMANCE GUIDE:

1. Identify patient's attitude or behavior that could be improved.
2. Review with patient persons with whom the patient is familiar and who display a more positive attitude or behavior:
   A. Persons in patient's home/work/school environment.
   B. Other patients served by agency.
   C. Other staff.
   D. Persons from history.
   E. Persons from current events.
3. Discuss example of a positive attitude or behavior on the part of a person with whom the patient is familiar.
4. Encourage feedback or questions from the patient.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: IMPLEMENTING THERAPEUTIC MEASURES

PERFORMANCE OBJECTIVE NO. 121

TASK: Arrange for use of community and educational resources.

STANDARD OF PERFORMANCE OF TASK:

Selection of resources for each patient must be defensible based on recorded qualities of the individual and accepted therapeutic activities. Previsions for care/return of materials must be arranged based on patient's history of responsible/ neglectful behavior. The occupational therapy assistant or aide must return the resources on or before the predetermined return date.

CONDITIONS FOR PERFORMANCE OF TASK:

Toys/games
Support persons
Books/recordings
Classes/meetings
Patient's records
Equipment catalogs

PERFORMANCE GUIDE:

1. Assess patient's interests/abilities/needs.
2. Motivate patient/create interest.
3. Identify available resources.
4. Match patient with resources.
5. Note specific materials identified for each patient.
6. Obtain resource materials.
7. Transport resource materials to patient.
8. Explain use of resource materials to patient.
   A. Care.
   B. Due date.
   C. Special instructions.
9. Identify when resource materials will be exchanged/returned.
10. Inform patient and/or support person when materials are to be exchanged/returned.

PERFORMANCE GUIDE: (cont.)

11. Check to see that materials have been exchanged/returned.
12. Reassess patient's interests/needs.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 122

TASK: Verify patient's identification.

STANDARD OF PERFORMANCE OF TASK:

Patient's identification must be established by visual recognition, verbal identification, patient's identification bracelet, identification card (blue card), physician's orders, patient's chart, and/or outpatient form.

CONDITIONS FOR PERFORMANCE OF TASK:

Scheduling log
Patient's records
Other department/agency staff
Patient's family/support person
Patient's identification bracelet

PERFORMANCE GUIDE:

1. Check scheduling log for name of next scheduled patient.
2. Wait for patient to arrive, or travel to patient's home, work site or school as applicable.
3. Greet patient, patient's family and/or support persons.
4. Identify yourself:
   - A. Name.
   - B. Position.
5. Seek information regarding patient's identity:
   - A. Ask the patient to identify themselves.
   - B. Ask the person accompanying the patient (patient's family, support person) to identify the patient.
   - C. Check the inpatient's identification bracelet.
   - D. Check inpatient's chart if chart was sent with patient.
   - E. Ask other staff (who have seen the patient previously) the patient's name.

PERFORMANCE GUIDE: (cont.)

NOTE: Always be as personable as possible with the patient (i.e., speak to the patient first even if information could more readily be gained from person accompanying the patient). State the patient's name as part of the interaction (i.e., "Hello, are you John Smith?")

CAUTION: Identification of patient who is disoriented or lack language skills/ abilities must be verified by a reliable source.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 123

TASK: Assist patient in pain.

STANDARD OF PERFORMANCE OF TASK:

Symptoms that patient is in pain must be noticed. Decisions made regarding actions to take to negate pain must take into account the patient's condition, overall program, nature of the therapy, the patient's history of false/exaggerated complaints and consultation with persons familiar with the patient.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Other department/agency staff
Patient's family/support persons

PERFORMANCE GUIDE:

1. Notice patient expressing pain:
   A. Verbalization of pain.
   B. Face grimaces.
   C. Teeth grinding.
   D. Spasticity.
   E. Attempts at repositioning.
   F. Loss of breath.
   G. Choking.
   H. Loss of consciousness.
2. Secure emergency assistance if needed.
3. Alert person conducting the patient's therapy session, if applicable.
4. Take action to negate pain:
   NOTE: Action taken must be based on knowledge of patient's condition, type of therapy, history of misrepresentation as attempt for attention (crying wolf) and degree that pain cannot be avoided.
   A. Adjust/remove equipment.
   B. Reposition patient.
   C. Provide modalities (icing, deep pressure).

PERFORMANCE GUIDE: (cont.)

    D. Discontinue treatment/activity and tell patient to rest.
    E. Distract patient by asking questions.
    F. Assist patient in toileting.
    G. Explain the importance of the therapy and that the pain cannot be avoided.
5. Notify patient's family, teacher, support persons, nursing staff or physician of patient's pain and expectation of continuation or reoccurrence of patient's pain. If the pain is associated with the therapy, explain the importance of the therapy and note that the pain cannot be avoided.
6. Note patient's responses and actions taken.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 124

TASK: Escort patient.

STANDARD OF PERFORMANCE OF TASK:

The patient must be greeted in a courteous manner and patient's identification must be verified. The patient must be given assistance as needed and the assistant or aide must remain with the patient until the destination is reached.

CONDITIONS FOR PERFORMANCE OF TASK:

Appointment log
Patient's schedule
Patient's functional ambulation equipment

PERFORMANCE GUIDE:

1. Review appointment log.
2. Greet patient.
3. Identify patient to be escorted.
4. Direct patient to appropriate room/area.
5. Assist patient in:
    - A. Standing
    - B. Balancing
    - C. Ambulation.
    - D. Sitting.

      NOTE: Patient should be encouraged to function as independently as possible.
6. Ensure patient's comfort.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 125

TASK: Position patient.

STANDARD OF PERFORMANCE OF TASK:

Patient's position must be in congruence with multi-disciplinary recommendations in patient's records and must be conducive to optimum functioning and attainment of prescribed goals. Patient's comfort must be maximized and injury avoided.

CONDITIONS FOR PERFORMANCE OF TASK:

Bed
Chair
Pillows
Weights
Mat table
Stretcher
Wheelchair
Foam blocks
Wall mirror
Activity mat
Blanket rolls
Support person
Table/slant top
Patient's records
Transfer equipment
Cardboard and tape
Bolster/safety straps
Wheelchair accessories
Patient support apparatus

PERFORMANCE GUIDE:

1. Review patient's records.
2. Transfer patient if needed.
3. Assess patient's position according to planned activity:
   NOTE: Establish communication with patient and/or look for signs of discomfort.

PERFORMANCE GUIDE: (cont.)

    A. Determine required position for activity.
    B. Attempt activity noting any difficulty in the chosen position.
    C. Question patient on comfort, suitability of position.

4. Select position.
   NOTE: Check records for conditions limiting positioning.
   NOTE: Patient may provide feedback on suitability of position.
5. Secure required equipment.
   NOTE: Area must be cleared of obstacles or things that patient may try to grab.
6. Secure required assistance.
   NOTE: Positioning may be clarified with other rehabilitation services if patient's records are not specific.
   NOTE: Some positioning must be done in conjunction with assistance of other staff.
7. Inform patient of positioning procedures:
   A. Patient assists in positioning.
   B. Patient provides feedback.
   C. Patient attempts to position themselves.
8. Alter conditions affecting patient position:
   A. Padding, cushion, support blocks.
   B. Wheelchair accessories.
   C. Transfer patient to mat, chair, or standing position.
9. Secure patient's position.
   NOTE: Patient should be engaged in a purposeful activity while in position.
10. Check patient's comfort.
11. Reposition patient, if needed.
12. Monitor patient's position.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 126

TASK: Perform patient transfers.

STANDARD OF PERFORMANCE OF TASK:

The transfer technique used must be in congruence with multi-disciplinary recommendations in the patient's records. The patient, helper and occupational therapy assistant or aide must perform as a team to change the location of the patient without injury to patient or staff or damage to equipment.

CONDITIONS FOR PERFORMANCE OF TASK:

Bed
Chair
Mat table
Other staff
Activity mat
Transfer belt
Sliding board
Patient's records
Toilet/raised toilet seat
Tub with tub bench or tub chair
Functional ambulation equipment

PERFORMANCE GUIDE:

1. Assess patient's transfer abilities:
   A. Review patient's records.
   B. Observe patient.
   C. Question patient.
   D. Question other staff.
2. Secure help.
   NOTE: Secure assistance to avoid an emergency rather than securing help after an emergency has occurred.
3. Prepare transfer environment.
   NOTE: Apply transfer belt, if needed.
4. Explain transfer procedure to patient and person helping with transfer.

PERFORMANCE GUIDE: (cont.)

5. Position yourself.
   NOTE: Consider entire transfer procedure when positioning yourself, repositioning yourself when supporting the patient may be difficult.
6. Check helper's body position.
7. Coordinate signal for beginning of lift.
8. Signal beginning of lift.
9. Lift patient.
10. Assist patient with pivoting.
11. Lower patient.
12. Position patient.
13. Ensure patient's comfort and safety.
14. Secure patient.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 127

TASK: Modify patient's home or work environment.

STANDARD OF PERFORMANCE OF TASK:

Changes made in patient's home/work environment must be based on home/work evaluation results/ recommendations and input from patient, support persons and/or employer. Modifications must increase patient's functional independence and safety. Work performed must be noted.

CONDITIONS FOR PERFORMANCE OF TASK:

Tool kit
Transportation
Patient's records
Patient's home/work environment
Patient/support person/employer
Home/work site evaluation results/recommendations

PERFORMANCE GUIDE:

1. Secure information regarding directions for reaching the patient's home/work.
2. Review patient's records:
    - A. Patient's deficiencies.
    - B. Patient's adaptive equipment.
    - C. Patient's use of support persons.
    - D. Patient's work/homemaking responsibilities.
    - E. Home/work site evaluation results/ recommendations.
3. Travel to patient's home/work site.
   NOTE: Ensure that required equipment has been taken.
4. Greet patient/support persons/employer.
5. Inform patient/support person/employer of work to be performed.
6. Modify entrances:
   CAUTION: If work is beyond ability of assistant or aide, schedule work with contractors or faculty maintenance personnel.
    - A. Install door widening hinges.
    - B. Install door knob turner.

PERFORMANCE GUIDE: (cont.)

- C. Install non-slip floor/stair coverings.
- D. Install safety rails.
- E. Install lighting.

- F. Remove/fasten down rugs.
- G. Install locks/other security measures.
- H. Remove clutter from stairs, hallway.

7. Modify arrangement of home facilities used for activities of daily living.
8. Rearrange furniture.
9. Install kitchen equipment.
10. Rearrange kitchen appliances and supplies.
11. Change direction of door opening on refrigerator or stove.
12. Rearrange bedroom, bedroom closets and storage areas.
13. Install light switch extenders.
14. Change position/height of telephone, or add handle to telephone.
15. Install special purpose telephone.
16. Rearrange laundry facilities.
17. Install fire extinguisher and smoke detectors.
18. Devise system for notification of emergency services.
19. Schedule patient's support services:
    - A. Family members living in home.
    - B. Visiting practitioners, family or friends.
    - C. Neighbors.
    - D. Reassignment of some aspects of some tasks to co-workers, family, etc.
20. Record home/work modifications made.
21. Encourage questions from the patient/support persons/employers.
22. Answer questions.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy: Practical skills for physical dysfunction

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 128

TASK: Assist patient in toileting during therapy.

STANDARD OF PERFORMANCE OF TASK:

Patient must accomplish voiding with maximum comfort and safety including provision of transfer to and from commode, position of urinal or bed pan, and assistance with cleaning. Output data must be reported if required and urinal or bedpan must be cleaned according to department procedures.

CONDITIONS FOR PERFORMANCE OF TASK:

Gloves
Call button
Air freshener
Transfer belt
Toilet tissue
Support person
Patient's records
Cleaning solution
Disinfectant, water, towel, and washcloth
Urinal, bedpan, bedside commode or bathroom

PERFORMANCE GUIDE:

1. Identify patient's capabilities and need for assistance with toileting:
   A. Review patient's records.
   B. Question patient.
   C. Question other staff.
2. Secure required assistance.
   NOTE: Secure assistance to avoid an emergency rather than securing help after an emergency has occurred.
3. Wash hands.
4. Don gloves.
5. Provide assistance as needed:
   A. Provide urinal or bedpan, or transfer patient to commode as needed.
      NOTE: Use transfer belt, if needed.

PERFORMANCE GUIDE: (cont.)

- B. Provide for patient's privacy
  - NOTE: Patient's level of functional independence may require constant monitoring.
  - NOTE: Instruct patient to signal when finished or return in 5 minutes if not signaled.
- C. Assist patient in cleaning.
- D. Remove urinal or bedpan.
  - NOTE: Observe and report output data if needed.
- E. Empty and clean urinal or bedpan.
  - NOTE: Follow department procedures.

6. Discard gloves.
7. Wash hands.
8. Transfer or assist in transferring patient to wheelchair or bed.
9. Notify facility personnel regarding cleanup of spillage.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 129

TASK: Measure intake and output during therapy.

STANDARD OF PERFORMANCE OF TASK:

All intake must be measured and reported. Urine, emesis and diarrhea must be collected, measured and reported.

CONDITIONS FOR PERFORMANCE OF TASK:

Gloves
Bedpan or urinal
Patient's records
Graduated specimen cup
Disinfectant, water and towel

PERFORMANCE GUIDE:

1. Identify patient for whom intake and output is being monitored:
    A. Review patient's records.
    B. Question staff.
2. Identify all intake and output to be measured.
3. Measure and report all intake.
4. Provide patient with container and private area; ensure patient's comfort; and provide other assistance as needed.
    NOTE: Follow department procedures regarding patient's safety, sanitation and the use of support persons.
5. Measure and report output.
6. Wash hands.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING PATIENT CARE SERVICES

PERFORMANCE OBJECTIVE NO. 130

TASK: Monitor patient's vital statistics during therapy.

STANDARD OF PERFORMANCE OF TASK:

Patient's activities must be altered, and/or emergency personnel notified in the event of abnormal patient responses.

CONDITIONS FOR PERFORMANCE OF TASK:

Stethoscope
Timing device
Patient's chart
Blood pressure cuff
Patient identification bracelet

PERFORMANCE GUIDE:

1. Identify patient who requires monitoring.
2. Monitor blood pressure.
3. Monitor patient's pulse and respiration.
4. Instruct patient to rest as needed.
5. Notify emergency personnel in the event of abnormal patient responses.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 131

TASK: Report patient's behavioral statistics observed during therapy.

STANDARD OF PERFORMANCE OF TASK:

Assistant or aide must recall requests for reporting of behavioral statistics, note specifics of behaviors observed, and report the information via method and format requested.

CONDITIONS FOR PERFORMANCE OF TASK:

Telephone
Mail service
Patient's records
Other practitioners
Patient's family, significant others, caretakers

PERFORMANCE GUIDE:

1. Identify need for reporting of patient's statistics.
   A. Formal request in patient's records.
   B. Informal request from patient's family, significant others or care takers.
2. Identify behavior statistics reported in the past.
3. Monitor patient during therapy.
4. Note significant behavior:
   A. Aggressive behaviors.
   B. Destructive behaviors.
   C. Disruptive behaviors.
   D. Frustration.
   E. Sexually aberrant behavior.
   F. Hyperactivity.
   G. Self-abusive behavior.
   H. Self-stimulatory behaviors.
   NOTE: Notations regarding patient's behavior should be specific (i.e., out of seat three times in 5 minutes).

PERFORMANCE GUIDE: (cont.)

5. Note the conditions surrounding the behavior:
    - A. Activity or treatment in which the patient was engaged.
    - B. Environmental stimuli or lack of stimuli.
    - C. Antagonisms (i.e., within group activity).
6. Note behavior statistics in patient's records.
7. Forward a written description of the behaviors if requested.
8. Discuss behaviors with other staff, patient's family, significant others, care takers or practitioners.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 132

TASK: Assist patient in dressing and undressing.

STANDARD OF PERFORMANCE OF TASK:

Apparel must be removed or donned so that patient's apparel is suitable for the patient's scheduled therapy session or the patient's exit from the therapy area. Patient must be encouraged to dress/undress as independently as possible. Precautions, including patient's privacy, security of valuables, working within patient's range of motion, avoiding aggravation of sensitive areas and avoiding stimulation of excess muscle tone must be taken.

CONDITIONS FOR PERFORMANCE OF TASK:

Bed
Chair
Mat table
Patient's records
Patient's clothing
Patient's dressing aids
Patient's adaptive equipment

PERFORMANCE GUIDE:

1. Greet patient.
2. Explain apparel that must be removed/donned and purpose.
3. Assess patient's ability to remove/don the specific apparel:
   - A. Question patient.
   - B. Review patient's records.
   - C. Observe patient's attempt at the procedure.
     NOTE: Patient should be encouraged and allowed to perform the procedure as independently as possible.

PERFORMANCE GUIDE: (cont.)

4. Identify methods for assisting patient:
    - A. Transfer patient to or from chair, mat table or bed.
    - B. Position patient.
      CAUTION: Secure required assistance prior to attempting transfer or positioning of patient.
5. Provide for patient's privacy.
6. Facilitate removal of apparel:
    - A. Supply patient with dressing aids.
    - B. Unfasten fasteners (i.e., buckles, zippers, hooks, buttons).
    - C. Remove jewelry/secure jewelry.
      CAUTION: Assure security of jewelry (i.e. locked drawer or cabinet, hand it to patient's family/support person, keeep it on table so that patient can see it.)
    - D. Assist with positioning or position patient.
      CAUTION: Movements required for removal of apparel may challenge patient's ability to keep their balance; precautions must be taken.
    - E. Assist manually as needed.
      NOTE: Work within the patient's range of motion, avoid aggravation of sensitive areas (damaged skin, tactile defensiveness) and avoid stimulation of excess muscle tone.
7. Facilitate donning of apparel:
    - A. Assist with positioning or position patient.
      CAUTION: Movements required for removal of apparel may challenge patient's ability to keep their balance; precautions must be taken.
    - B. Supply patient with dressing aids.
    - C. Assist manually as needed.
      NOTE: Work within the patient's range of motion, avoid aggravation of sensitive areas (damaged skin, tactile defensiveness) and avoid stimulation of excess muscle tone.

PERFORMANCE GUIDE: (cont.)

    D. Fasten fasteners (i.e., buckles, zippers, hooks, buttons).
    E. Return jewelry/put jewelry on patient.
       CAUTION: Ensure that patient acknowledges that all jewelry has been returned.
8. Note any irregularities observed during dressing or undressing.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 133

TASK: Assist patient with assistive/supportive devices.

STANDARD OF PERFORMANCE OF TASK:

Assistive/supportive devices must be removed or applied so that patient is prepared for the scheduled therapy session or for exit from the therapy area. Patient must be encouraged to remove/apply the assistive/supportive devices as independently as possible. Precautions, including patient's privacy, working within patient's range of motion, avoiding aggravation of sensitive areas and avoiding stimulation of excess muscle tone must be taken.

CONDITIONS FOR PERFORMANCE OF TASK:

Bed
Chair
Mat table
Patient's records
Patient's adaptive equipment
Patient's assistive/supportive devices

PERFORMANCE GUIDE:

1. Greet patient.
2. Explain what assistive/supportive devices must be removed/applied and purpose.
3. Assess patient's ability to remove/apply the specific device:
   - A. Question patient.
   - B. Review patient's records.
   - C. Observe patient's attempting procedure.
     NOTE: Patient should be encouraged and allowed to perform the procedure as independently as possible.

PERFORMANCE GUIDE: (cont.)

4. Identify methods for assisting patient:
    A. Transfer patient to or from chair, mat table or bed.
    B. Position patient.
       CAUTION: Secure required assistance prior to attempting transfer or positioning of patient.
5. Provide for patient's privacy.
6. Facilitate removal of assistive/supportive device:
    A. Unfasten fasteners.
    B. Assist manually as needed.
       NOTE: Work within the patient's range of motion, avoid aggravation of sensitive areas (damaged skin, tactile defensiveness) and avoid stimulation of excess muscle tone.
    C. Assist with positioning or position patient.
       CAUTION: Movements required for removal of device may challenge patient's ability to keep their balance; precautions must be taken.
7. Facilitate applying of device:
    A. Assist patient with positioning or position patient.
       CAUTION: Movements required for applying of device may challenge patient's ability to keep their balance and precautions must be taken.
    B. Assist manually as needed.
       NOTE: Work within the patient's range of motion, avoid aggravation of sensitive areas (damaged skin, tactile defensiveness) and avoid stimulation of excess muscle tone.
    C. Fasten fasteners.
8. Note any irregularities observed during applying/removing devices.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PERFORMING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 134

TASK: Wash hands and arms aseptically.

STANDARD OF PERFORMANCE OF TASK:

Hands, wrists, forearms, and fingernails must be clean, dry, and freed of pathogenic microorganisms after each patient.

CONDITIONS FOR PERFORMANCE OF TASK:

Sink
Towel
Water
Lotion
Scrub brush
Disinfectant

PERFORMANCE GUIDE:

1. Turn on water.
2. Adjust water temperature to warm.
3. Wet hands thoroughly with water, holding hands downward.
4. Apply cleansing agent.
5. Wash hands and arms, using friction for approximately 30 seconds:
   A. Wash palms and backs of hands.
   B. Wash fingers in rotary motions.
   C. Wash wrists and forearms.
6. Rinse arms and hands.
7. Repeat Steps 5 and 6.
8. Clean fingernails using scrub brush.
9. Rinse hands.
10. Turn water off, using foot or knee pedal or paper towel.
11. Dry hands.
12. Apply lotion.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 135

TASK: Develop individualized functional communication devices.

STANDARD OF PERFORMANCE OF TASK:

Training procedures must be in congruence with the patient's occupational therapy goals. The selected functional communication methods must be within the patient's financial resources and the patient's abilities. The patient's functional independence must be maximized including the use of adapted techniques, adaptive equipment and support persons.

CONDITIONS FOR PERFORMANCE OF TASK:

Typewriter
Book holder
Writing board
Tape recorder
Support persons
Adapted intercom
Patient's records
Magnification devices
Mouth stick/head pointer
Writing instrument holder
Computer and specialized software
Adapted telephone and telephone holding devices
Communications boards (words, numbers, pictures)

PERFORMANCE GUIDE:

1. Identify patient's needs and abilities regarding communications:
   A. Review patient's records.
   B. Review patient's evaluation results/ recommendations.
   C. Interview patient, patient's family or support persons.
   D. Observe patient's communicating or attempting to communicate.
2. Explore possible functional communication strategies, equipment and supplies:

PERFORMANCE GUIDE: (cont.)

NOTE: Patient's financial resources, degree of support persons available and time allocated to learn new methods must be considered.

- A. Review occupational therapy supply catalogs.
- B. Review occupation therapy resource materials.
- C. Consider previously used methods.
- D. Adapt methods currently or previously used by patient.
- E. Consult specialized practitioner (i.e., speech therapist, vision impairment specialists, sign language specialists).

NOTE: Selected methods should allow patient to function as independently as possible.

3. Develop or order equipment and supplies:
   - A. Adapted telephone holding devices.
   - B. Adapted intercom.
   - C. Tape recorder.
   - D. Book holder.
   - E. Writing board.
   - F. Writing instrument holder.
   - G. Communications boards (words, numbers, pictures).
   - H. Magnification devices.
   - I. Mouth stick/head pointer.
   - J. Computer and specialized software.
   - K. Typewriter.
4. Train patient in use of equipment:
   - A. Explain purpose of equipment.
   - B. Demonstrate use of equipment.

     NOTE: Patient may have a better way to use the equipment and should be encouraged to develop their own system.
   - C. Observe patient using or attempting to use equipment.
   - D. Modify equipment.
   - E. Monitor patient while they practice use of the equipment.
   - F. Assess patient's ability to use equipment.
5. Notify community agencies (i.e., police, fire protection) of system that will be used by patient living at home (i.e., prerecorded messages requesting assistance, flashing porch light or a sign in a window.)

PERFORMANCE GUIDE (cont.)

6. Note patient's responses, abilities and needs.

SOURCE OF STANDARD:

Writing team of incumbent workers
Occupational therapy in mental retardation

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 136

TASK: Develop individualized memory assisting devices.

STANDARD OF PERFORMANCE OF TASK:

Training procedures must be in congruence with the patient's occupational therapy goals. The selected memory assisting methods must be within the patient's financial resources and the patient's abilities. The patient's functional independence must be maximized including the use of adapted techniques, adaptive equipment and support persons.

CONDITIONS FOR PERFORMANCE OF TASK:

Notebook
Calendar
Telephone
Clock/timer
Tape recorder
Memory notebook
Support persons
Memory checklist
Patient's records
Computer and specialized software
Functional communications equipment/supplies

PERFORMANCE GUIDE:

1. Identify patient's needs and abilities regarding memory:
   NOTE: Consider patient's daily routine, appointments and prescribed medications.
   A. Review patient's records.
   B. Review patient's evaluation results/ recommendations.
   C. Interview patient, patient's family or support persons.
   D. Question patient (i.e., time, place).
2. Explore possible memory assisting strategies, equipment and supplies:
   NOTE: Patient's financial resources and degree of support persons available must be considered.
   A. Review occupational therapy supply catalogs.
   B. Review occupation therapy resource materials.

PERFORMANCE GUIDE: (cont.)

- C. Consider previously used methods.
- D. Adapt methods currently or previously used by patient.
  NOTE: Selected methods should allow patient to function as independently as possible.

3. Develop or order equipment and supplies:
   - A. Timing devices.
   - B. Recorded instructions/cueing for activities of daily living.
   - C. Calendars/appointment book.
   - D. Informational displays.
   - E. Memory notebook or checklist
4. Train patient in use of memory-assisting devices.
   - A. Explain purpose of devices.
   - B. Demonstrate use of devices.
   - C. Observe patient using or attempting to use devices.
   - D. Modify devices.
   - E. Monitor patient while they practice use of the devices.
   - F. Assess patient's ability to use devices.
5. Arrange for support persons to call or visit the patient at specific times (i.e., prior to scheduled appointments, verification that medications were taken).
6. Note patient's responses, abilities and needs.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 137

TASK: Inventory supplies and equipment.

STANDARD OF PERFORMANCE OF TASK:

Inventory forms must be completed including item name, identification number, restocking number, and number on hand.

CONDITIONS FOR PERFORMANCE OF TASK:

Inventory forms

PERFORMANCE GUIDE:

1. Obtain inventory forms and locate supply area.
2. Count the number of each item on hand.
3. Record the count on the inventory form:
   - A. Item name.
   - B. Identification number.
   - C. Number on hand.
4. File inventory forms.
5. Order needed items or notify appropriate personnel.

SOURCE OF STANDARD:

Writing team of incumbent workers.

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 138

TASK: Order supplies and equipment.

STANDARD OF PERFORMANCE OF TASK:

Purchase order preparation must include list and description of each item, cost, vendor's name and address, and purchase authorization. Required supplies and equipment must be ordered.

CONDITIONS FOR PERFORMANCE OF TASK:

Catalogs
Order forms
Inventory ledger
Mail service/telephone

PERFORMANCE GUIDE:

1. Identify which items are currently needed.
   NOTE: Check updated supply inventory ledger.
2. Record descriptive information for each item.
3. Consult catalogs and/or sales representatives to compare cost, delivery date, and features.
4. Send order out for bid, if department policy dictates.
5. Select desired vendor.
6. Complete purchase order form:
   A. Name and address of vendor.
   B. Item name and description.
   C. Cost.
   D. Quantity.
   E. Method of shipping.
7. Obtain authorization for purchase.
8. Forward order to vendor.
9. File a copy of the order.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 139

TASK: Stock supplies and equipment.

STANDARD OF PERFORMANCE OF TASK:

Supplies and equipment must be organized. Manufacturer's storage recommendations must be followed. Perishable items must be dated.

CONDITIONS FOR PERFORMANCE OF TASK:

Labels
Storage areas
Supplies/equipment
Stock room inventory sheet.

PERFORMANCE GUIDE:

1. Identify areas to be used for storing items.
2. Select areas within the storage areas to be used for storing specific items.
3. Place items in the designated area.
   NOTE: Rotate stock as applicable.
4. Date perishable items.
5. Update stock room inventory sheet.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 140

TASK: Assemble equipment.

STANDARD OF PERFORMANCE OF TASK:

Manufacturer's instructions must be followed, if available, and equipment must function as intended.

CONDITIONS FOR PERFORMANCE OF TASK:

Tool kit
Equipment (to be assembled)
Manufacturer's assembly instructions

PERFORMANCE GUIDE:

1. Verify that all parts of the equipment are present.
2. Follow assembly instructions, if available.
   NOTE: Reading the entire assembly instructions before starting assembly may help avoid problems.
   CAUTION: If assembly instructions are not available, obtain a reliable source of information prior to starting the assembly.
3. Test newly assembled equipment.
4. Clean up work area.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 141

TASK: Evaluate equipment condition.

STANDARD OF PERFORMANCE OF TASK:

Inspections indicated in manufacturer's maintenance instructions must be performed on a timely basis and all defects/malfunctions in operation of equipment must be identified.

CONDITIONS FOR PERFORMANCE OF TASK:

Tool kit
Equipment (to be evaluated)
Manufacturer's maintenance instructions

PERFORMANCE GUIDE:

1. Review information regarding inspection of equipment if available (i.e. manufacturer's maintenance instructions).
2. Identify how equipment will be used.
3. Check operation of equipment.
4. Check for defects/malfunctions in equipment operation.
5. Make minor adjustments or repairs if possible.
6. Recheck operation of equipment.
7. Report condition of equipment and schedule repairs if applicable.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 142

TASK: Repair equipment.

STANDARD OF PERFORMANCE OF TASK:

Manufacturer's instructions must be followed, if available. Repaired equipment must function as intended.

CONDITIONS FOR PERFORMANCE OF TASK:

Tool kit
Equipment (to be repaired)
Manufacturer's repair instructions

PERFORMANCE GUIDE:

1. Disconnect electric power sources if applicable.
2. Follow repair instructions if available.
   NOTE: Reading the entire repair instructions before starting work may help avoid problems.
   CAUTION: If repair instructions are not available, obtain a reliable source of information prior to starting the repair.
3. Test the repaired equipment.
4. Clean up the work area.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 143

TASK: Design adaptive equipment.

STANDARD OF PERFORMANCE OF TASK:

The design of the adaptive equipment must contribute to meeting the patient's needs. The design must be feasible including considerations for patient's financial resources, abilities, time available for training and availability of materials. The specifications for the design must be recorded or communicated such that the adaptive equipment can be built as intended.

CONDITIONS FOR PERFORMANCE OF TASK:

Patient's records
Patient's support persons
Patient's current adaptive equipment

PERFORMANCE GUIDE:

1. Collect information regarding patient's adaptive equipment needs:
   A. Review patient's records.
   B. Interview patient/support person.
   C. Observe patient engaged in activity in which adaptive equipment is required.
2. Outline objectives and requirements of the adaptive equipment.
   NOTE: Consider patient's resources (i.e., training time limitations and financial resources).
3. Formulate preliminary design specifications.
4. Evaluate preliminary design specifications in reference to the objectives and requirements of the adaptive equipment.
   NOTE: A model of the adaptive equipment may be necessary in order to test the preliminary design.

PERFORMANCE GUIDE (cont.)

5. Formulate the final design specifications.
6. Record and/or communicate the design specifications to persons delegated to build the adaptive equipment.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 144

TASK: Build adaptive equipment.

STANDARD OF PERFORMANCE OF TASK:

The newly built adaptive equipment must meet or exceed the design specifications. All safety procedures must be followed.

CONDITIONS FOR PERFORMANCE OF TASK:

Tool kit/workshop
Building materials
Adaptive equipment design specifications

PERFORMANCE GUIDE:

1. Review design specifications.
   NOTE: If changes in design are required, they should be made prior to building the equipment.
2. Verify that all tools, equipment and materials are available and in safe working order.
3. Lay out size and shape of individual pieces.
4. Cut individual pieces.
   CAUTION: Safety procedures must be followed.
5. Fasten the individual pieces together.
   NOTE: Checking fit of pieces prior to starting fastening will provide an indication of possible problems.
6. Finish exposed surfaces.
   CAUTION: Sharp edges and rough surfaces must be eliminated.
7. Check the function of the adaptive equipment.
8. Clean up work area.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 145

TASK: Make low temperature thermo-plastic splints.

STANDARD OF PERFORMANCE OF TASK:

The splint must be in congruence with the splint prescription. Discomfort to patient during splint making and splint wearing must be minimized. Patient must be advised in use and care of splint including possible problems associated with wearing splints.

CONDITIONS FOR PERFORMANCE OF TASK:

Tape
Tongs
Edger
Scissors
Paper toweling
Flexible ruler
Bonding material
Patient's records
Splint prescription
Pencil or marking crayon
Splint padding materials
Ace bandage or stockinette
Fasteners (velcro, D-rings)

PERFORMANCE GUIDE:

1. Identify requirements of splint to be made:
   A. Review splint prescription and/or patient's records.
   B. Interview patient/support person.
   C. Evaluate patient's sensitivity and range of motion.
2. Prepare work area.
3. Explain procedure to patient.
   NOTE: Patient must be encouraged to indicate if and when they experience discomfort.

PERFORMANCE GUIDE: (cont.)

4. Make splint pattern:
   A. Trace/outline patient's hand/arm or leg on paper toweling.
   B. Mark locations of joints.
   C. Allow for additional material at margins.
   D. Cut pattern.
   E. Place pattern on hand/arm to evaluate size/shape.
   F. Trim pattern as needed.
   G. Fit pattern, taping in place as needed.
   H. Mark pattern as to top, bottom, left, right, etc.
5. Transfer size/shape of pattern to thermoplastic material.
   NOTE: Patient's hand/arm should be positioned and work area otherwise readied prior to starting heating of thermo-plastic as time is limited once thermo-plastic is heated.
6. Cut a piece of thermo-plastic that encompasses the pattern from the larger sheet.
7. Submerse the thermo-plastic in hot water until it is pliable.
   NOTE: Use tongs to remove thermo-plastic from hot water.
8. Cut pliable thermo-plastic to pattern.
   NOTE: Work fast.
9. Test temperature of thermo-plastic (i.e., is it too hot for patient's skin).
10. Place warm thermo-plastic in position on patient's hand/arm.
11. Mark any areas of material to be trimmed.
12. Remove thermo-plastic from patient's hand/arm.
13. Reheat and trim material as needed.
    NOTE: When material is at proper temperature for cutting, a smooth edge is obtained when cutting.
14. Roll edges of material.
15. Repeat Steps 10 - 14 as needed.
    NOTE: Patient may provide input as to fit and comfort.
16. Cut and fit splint padding as needed.
17. Attach fasteners.
18. Check final fit including patient's/support person's ability to remove and replace splint.
19. Reheat and make final adjustments as needed.

PERFORMANCE GUIDE (cont.)

20. Train patient or make arrangements for training in use and care of splint including monitoring of redness and/or swelling.
    NOTE: Provide patient with written instructions for wearing scheduled splint
21. Clean up work area.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 146

TASK: Transport supplies to and from therapy area.

STANDARD OF PERFORMANCE OF TASK:

The supplies must be identified, collected and arranged according to established department policies.

CONDITIONS FOR PERFORMANCE OF TASK:

Storage area
Scheduling log
Patient's records
Occupational therapy supplies

PERFORMANCE GUIDE:

1. Review scheduling log to determine next patient.
2. Review patient's records to determine supplies required for scheduled activities.
   NOTE: If traveling to a remote site, take additional items in the event that conditions warrant change in the activities to be performed.
3. Remove items that are not needed from therapy area and place them in the storage area.
4. Retrieve items that are needed from the storage area and place them in the therapy area.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 147

TASK: Set up supplies for therapy.

STANDARD OF PERFORMANCE OF TASK:

The supplies must be identified, collected and arranged according to established departmental policies. Therapy environment must be conducive to therapy.

CONDITIONS FOR PERFORMANCE OF TASK:

Storage area
Scheduling log
Patient's records
Occupational therapy supplies

PERFORMANCE GUIDE:

1. Review scheduling log to determine next patient.
2. Review patient's records to determine equipment, supplies and environment required for scheduled activities.
3. Remove items that are not needed from therapy area and place them in the storage area.
4. Clean tables, mats and other equipment.
5. Arrange furniture or equipment to accommodate planned activity.
6. Arrange supplies:
   A. Items placed where patient can reach them.
   B. Items placed where patient cannot reach them.
   C. Items placed to attract patient's attention.
   D. Items removed to avoid distractions.
7. Recheck area to verify that all needed supplies are in place.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 148

TASK: Clean therapy area.

STANDARD OF PERFORMANCE OF TASK:

Items removed from the therapy area must be stored as designated by department procedures. Surfaces of furniture and equipment must be free of dust and grime.

CONDITIONS FOR PERFORMANCE OF TASK:

Storage area
Cleaning supplies

PERFORMANCE GUIDE:

1. Store equipment and supplies.
   NOTE: Before placing an item into storage be sure that all pieces are present (i.e., check floor for parts that were dropped).
2. File or forward paperwork (i.e., patient's charts, telephone messages, samples of patient's work).
3. Collect and dispose of trash.
4. Wipe clean tables, mats, chairs and equipment.
5. Arrange furniture and equipment.
6. Return cleaning supplies to storage area.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: PROVIDING SUPPORT SERVICES

PERFORMANCE OBJECTIVE NO. 149

TASK: Follow evacuation procedures.

STANDARD OF PERFORMANCE OF TASK:

Occupational therapy department's procedures must be followed for evacuation.

CONDITIONS FOR PERFORMANCE OF TASK:

Occupational therapy department emergency plan

PERFORMANCE GUIDE:

1. Recognize emergency alarm, and determine type of evacuation.
2. Perform tasks assigned by chief therapist.
3. Inform patients of evacuation procedures.
4. Maintain calm atmosphere throughout evacuation procedures.
5. Direct patients and staff to safe area.
6. Identify and move immobile patients.
7. Keep telephone lines open for emergency use.
8. Follow additional instructions from chief therapist.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 150

TASK: Apply for certification or recertification.

STANDARD OF PERFORMANCE OF TASK:

The requested information must be legible, and the form must be completed, signed, dated and forwarded to the certifying agency. Required payments must be made.

CONDITIONS FOR PERFORMANCE OF TASK:

Check/money order
Certification application form

PERFORMANCE GUIDE:

1. Review application form.
2. Complete and sign application form.
3. Submit completed application form to program director/administrator for required signatures and/or funding.
4. Complete check for payment of certification or recertification fees.
5. Forward completed application form to certifying agency.
   NOTE: Retain a copy of the completed application form for records.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 151

TASK: Maintain first aid/CPR certification.

STANDARD OF PERFORMANCE OF TASK:

First aid/CPR courses or refresher courses must be completed, and proficiency in first aid/CPR must be demonstrated.

CONDITIONS FOR PERFORMANCE OF TASK:

First aid/CPR courses
Course enrollment form

PERFORMANCE GUIDE:

1. Identify when first aid/CPR courses will be offered.
   NOTE: It is the responsibility of the aide to register for refresher courses.
2. Review work schedule and personal schedule for available dates and times.
3. Arrange for changes in work schedule and personnel schedule to facilitate first aid/CPR course attendance.
4. Complete first aid/CPR course enrollment form.
5. Pay required enrollment fees, as necessary.
6. Pass course and receive card.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 152

TASK: Review professional research journals or sales catalogs.

STANDARD OF PERFORMANCE OF TASK:

Information which could affect patients or department procedures must be collected and filed or forwarded to the person whom it concerns.

CONDITIONS FOR PERFORMANCE OF TASK:

Other staff
Occupational therapy sales catalogs
Occupational therapy resource books
Occupational therapy research journals

PERFORMANCE GUIDE:

1. Scan document:
   A. Table of contents.
   B. Abstracts.
   C. Sections of sales catalog pertinent to department.
2. Identify material warranting close review by staff and/or patients.
3. Schedule time for close review of selected material.
4. Read document.
5. Note pertinent information.
6. Collect background or additional information:
   A. Read resource books.
   B. Question other staff.
7. File newly collected information.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 153

TASK: Participate in professional meetings.

STANDARD OF PERFORMANCE OF TASK:

Meeting agenda must be reviewed prior to meeting. Information to be shared must be organized prior to arrival at meeting and arrival at meeting must be on time. Information obtained must be shared with coworkers.

CONDITIONS FOR PERFORMANCE OF TASK:

Note pad
Work schedule
Meeting agenda
Calendar of events

PERFORMANCE GUIDE:

1. Check calendar of events for meeting date, time and location.
2. Check work schedule for conflicts with meeting schedule.
3. Review meeting agenda prior to meeting.
4. Identify items of interest, assemble materials and make notes of information to be input at the meeting.
5. Prepare a presentation:
    A. Secure a place on the agenda.
        NOTE: Check with person in charge of meeting room facilities if presentation involves equipment.
    B. Practice presentation.
        NOTE: Ensure that presentation can be completed within the allotted time.
6. Contact colleagues for arrangement of shared transportation.

PERFORMANCE GUIDE: (cont.)

7. Arrive at meeting place at least 15 minutes prior to scheduled meeting time.
8. Collect information.
   NOTE: Ask questions as needed to clarify information.
9. Give presentation when asked.
10. Answer questions about the presentation.
11. Share collected information with concerned parties.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 154

TASK: Present information at professional meeting.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy assistant or aide must represent the occupational therapy profession in a professional and courteous manner. Information to be presented regarding departmental policy, procedures or patients, must be cleared with supervisor, must be accurate, and must be presented clearly.

CONDITIONS FOR PERFORMANCE OF TASK:

Agenda
AV materials
Professional meeting
Professional meeting organizers (i.e., chairman, selection committee)

PERFORMANCE GUIDE:

1. Identify meeting time and place.
2. Obtain meeting agenda prior to meeting date.
3. Secure permission from supervisor if presentation involves information regarding department policy, procedures or patients.
4. Submit proposal for presentation to meeting organizers.
5. Identify amount of time you have been allowed for the presentation.
6. Check with person in charge of meeting room facilities if presentation requires equipment.
7. Prepare presentation.
8. Practice presentation.
   NOTE: Ensure that presentation can be completed within the allotted time.

PERFORMANCE GUIDE (cont.)

9. Arrive at meeting place at least 15 minutes prior to scheduled meeting time
10. Set up presentation/AV material where applicable.
11. Give presentation when asked.
12. Answer questions about the presentation.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 155

TASK: Maintain professional association membership.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy assistant or aide must meet the specified standards of the professional organization. Renewal application and fee must be submitted to the professional organization on or before due date.

CONDITIONS FOR PERFORMANCE OF TASK:

Check/money order
Membership application form
Professional association membership standards

PERFORMANCE GUIDE:

1. Review professional association standards.
2. Act in accordance with professional association standards.
3. Obtain membership application form.
4. Complete and sign membership application form.
5. Submit completed membership application form to program director/administrator for required funding if available.
6. Complete check for payment of membership fee if needed.
7. Submit membership application form to registry or professional association.
   NOTE: Retain a copy of the completed application form.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 156

TASK: Participate in occupational therapy in-services and workshops.

STANDARD OF PERFORMANCE OF TASK:

The occupational therapy assistant or aide must follow the instructions of in-service workshop instructor and provide the department director/administrator with proof of attendance and participation in accordance with established departmental procedures.

CONDITIONS FOR PERFORMANCE OF TASK:

Note pad
In-service/workshop information
Departmental workshop participation form

PERFORMANCE GUIDE:

1. Verify administrative approval to attend in-service/workshop and obtain participation form.
2. Verify workshop information:
   - A. Place.
   - B. Date.
   - C. Time.
   - D. Materials needed.
   - E. Continuing education points.
3. Complete professional leave form.
4. Arrange for other staff to cover scheduled appointments or cancel appointments.
5. Arrive at workshop prior to the scheduled starting time.
6. Follow instructions of workshop instructor.
7. Obtain appropriate signature on participation form upon completion of the workshop.

PERFORMANCE GUIDE (cont.)

8. Submit participation form to department director or administrator for reimbursement and/or to verify continuing education points received.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 157

TASK: In-service occupational therapy staff following a continuing education course.

STANDARD OF PERFORMANCE OF TASK:

The in-service objectives must be clearly stated, and address an educational need of the occupational therapy staff. The educational activities must be conducted to meet the specified objectives. Notice of in-service must be given in advance. Attendance and education records must be completed and filed.

CONDITIONS FOR PERFORMANCE OF TASK:

Meeting room
Details of meeting
List of participants
In-service program file
Audio-visual equipment
Blank in-service attendance sheet
Blank in-service education report

PERFORMANCE GUIDE:

1. Write instructional objectives for the in-service.
2. Select educational activities to meet objectives:
   A. Distribution of printed information.
   B. Guest speaker.
   C. Lecture.
   D. Hands-on activities.
   E. Discussion groups.
   F. Audio-visual presentation.
   G. Evaluation.
3. Organize instructional materials.
4. Practice instructional delivery.
5. Review schedule for in-service programs.
6. Complete in-service notice including:
   A. Subject.
   B. Time.
   C. Place.
   D. Date.

PERFORMANCE GUIDE: (cont.)

   E. Name(s) of presenter(s).
   F. Persons who will be in attendance.

7. Notify participants of details of in-service program.
8. Reserve audio-visual equipment.
9. Post notice approximately 2 weeks in advance.
10. Set up meeting room:
    A. Chairs.
    B. Audio-visual equipment.
11. Instruct in-service participants:
    A. Introduce topic.
    B. Provide information.
    C. Review information.
    D. Evaluate participants' comprehension.
12. Record attendance on in-service sheet including:
    A. Name of staff member.
    B. Department.
    C. Position.
    D. Date.
13. Complete in-service education report including:
    A. Date and time.
    B. Topic.
    C. Evaluation.
    D. Name(s) of presenter(s).
14. Attach attendance sheet to in-service report.
15. File attendance sheet and in-service report.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 158

TASK: Discuss ethical considerations with peers/superiors.

STANDARD OF PERFORMANCE OF TASK:

Information concerning ethical considerations provided by occupational therapy assistant or aide must be based on department procedure manual or past experience within the department. Questions from occupational therapy assistant or aide must be asked within a context that avoids misunderstandings.

CONDITIONS FOR PERFORMANCE OF TASK:

Peers/supervisor
Resource materials
Department procedure manual

PERFORMANCE GUIDE:

1. Identify ethical consideration for which a question exists.
2. Research ethical question:
   - A. Consider ethical standard adhered to in previous similar situations.
   - B. Consider department standard procedures.
   - C. Review resources materials.
3. Identify person best able and available to answer question.
4. Make appointment with peer/supervisor.
5. Initiate discussion:
   - A. Provide background information.
   - B. Pose question.
6. Participate in discussion:
   - A. Clarify questions:
     - (1) Request/provide additional information.
     - (2) Re-state question.
   - B. Consider department standards for ethics.
   - C. Consider ethical standard adhered to in a similar situation.
   - D. Answer questions.

PERFORMANCE GUIDE: (cont.)

7. Review resource materials.

SOURCE OF STANDARD:

Writing team of incumbent workers

DUTY: CONTINUING EDUCATION

PERFORMANCE OBJECTIVE NO. 159

TASK: Discuss procedural considerations with peers/superiors.

STANDARD OF PERFORMANCE OF TASK:

Procedural information provided by occupational therapy assistant or aide must be based on department procedure manual or past experience within the department. Questions from occupational therapy assistant or aide must be asked within a context that avoids misunderstandings.

CONDITIONS FOR PERFORMANCE OF TASK:

Peers/supervisor
Resource materials
Department procedure manual

PERFORMANCE GUIDE:

1. Identify procedural consideration for which a question exists.
2. Research procedural question:
   - A. Consider nonstandard procedures used in a previous similar situations.
   - B. Consider department standard procedures.
   - C. Review resource materials.
3. Identify qualified persons who are available to answer question.
4. Make appointment to with peer/supervisor.
5. Initiate discussion:
   - A. Provide background information.
   - B. Pose question.
6. Participate in discussion:
   - A. Clarify questions:
     - (1) Request/provide additional information.
     - (2) Restate question.
   - B. Consider department standard procedures.
   - C. Consider nonstandard procedures used in a similar situation.
   - D. Answer questions.

PERFORMANCE GUIDE: (cont.)

7. Review resource materials.

SOURCE OF STANDARD:

Writing team of incumbent workers

APPENDIX A

TOOLS, EQUIPMENT, AND WORK AIDS

APPENDIX A
TOOL, EQUIPMENT, AND WORK AIDS BY PERCENTAGE OF INCUMBENTS USING
(n = 73)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
190	Occupational therapy catalogs	60	82%
275	Therapeutic putty	60	82%
219	Puzzles	58	79%
232	Scissors	58	79%
20	Beads	55	75%
21	Bean bags	55	75%
276	Thera-band	54	74%
68	Craft supplies	53	73%
85	Eating utensils, adapted	51	70%
17	Balloons	50	68%
191	Office supplies	50	68%
29	Blocks	48	66%
274	Therapeutic balls	48	66%
86	Eating utensils, regular	47	64%
184	Mirror, activity	47	64%
307	Wheelchair	47	64%
12	Art supplies	46	63%
65	Cones	46	63%
227	Ruler	45	62%
129	Hand grip	44	60%
172	Markers, waterproof	44	60%
207	Pinch pin (clothes pin)	43	59%
208	Playing cards	43	59%
4	Activity tables	42	58%
118	Games, for adults	42	58%
119	Games, for children	42	58%
202	Pegboards/pegs	42	58%
175	Mat, exercise	41	56%
305	Weights	40	55%
52	Chair, regular	39	53%
80	Dressing aids	39	53%
83	Dycem, non-slip	38	52%
8	Appointment book	37	51%
30	Blocks, parquetry	37	51%
181	Measuring tape	37	51%
236	Sewing equipment	36	49%
271	Tactile supplies, equipment	36	49%
308	Wheelchair accessories	36	49%
214	Professional journals/books	35	48%
3	Activity mats	34	47%
237	Sewing supplies	34	47%
2	Activity board	33	45%
44	Card index files	33	45%

(table continued on next page)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
84	Dynamometer	33	45%
222	Reading material for patients	32	44%
306	Weights, strap-type	32	44%
19	Batteries	31	42%
102	Exerciser, upper extremities	31	42%
228	Safety belts	30	41%
18	Basin	29	40%
36	Bubbles	29	40%
127	Goniometer	29	40%
132	Heat gun	29	40%
240	Slings	29	40%
216	Pulley weight system	28	38%
94	Evaluation kit, perceptual	27	37%
167	Linens	27	37%
173	Massage lotion	27	37%
250	Sports/Recreation equipment/supplies	27	37%
286	Tools, wood working	27	37%
22	Beauty supplies	26	36%
37	Bucket	26	36%
45	Cart	26	36%
103	Extension cord	26	36%
158	Kitchen equipment, regular	26	36%
185	Mirror, posture	26	36%
186	Motor activity shapes	26	36%
299	Walker	26	36%
43	Card holder	25	34%
73	Cushion, supportive	25	34%
243	Splint forming materials	25	34%
289	Transfer board	25	34%
92	Evaluation kit, coordination	24	33%
108	Flashlight	24	33%
124	Gloves, examination	24	33%
206	Pinch gauge	24	33%
244	Splints, custom made	24	33%
164	Leather	23	32%
165	Leather working tools	23	32%
204	Personal hygiene supplies	23	32%
210	Positioning pillows	23	32%
248	Sponges	23	32%
291	Tray, lap	23	32%
13	Balance beam	22	30%
96	Evaluation kit, sensory	22	30%
128	Gowns, hospital	22	30%
168	Log books	22	30%
224	Restraints	22	30%
234	Scooter	22	30%
284	Tools, leather working	22	30%

(table continued on next page)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
87	Elbow/Heel protectors	21	29%
157	Kitchen equipment, adapted	21	29%
215	Progressive resistance exercise system	21	29%
296	Vibrator	21	29%
6	Air splints	20	27%
11	Arm board	20	27%
14	Balance board	20	27%
16	Balance stool/T-stool	20	27%
34	Bolster	20	27%
151	Infection control supplies	20	27%
193	Padding	20	27%
246	Splints, prefabricated	20	27%
280	Timer, automatic	20	27%
281	Toiletry equipment, adapted	20	27%
25	Bib	19	26%
194	Padding, adhesive	19	26%
259	Stethoscope	19	26%
282	Toiletry equipment, regular	19	26%
283	Tools, general mechanic	19	26%
27	Bicycle, exercise	18	25%
32	Boards, form	18	25%
41	Cane	18	25%
213	Privacy screens	18	25%
251	Spray gun/bottle	18	25%
292	Tumble form rolls	18	25%
1	Ace bandage	17	23%
61	Cold spray	17	23%
89	Elevation device, arm	17	23%
145	Household cleaning equipment, regular	17	23%
242	Sphygmomanometer	17	23%
260	Stockinette	17	23%
10	Apron	16	22%
63	Computer equipment, regular	16	22%
107	First aid kit	16	22%
115	Foot stools	16	22%
140	Hi-Lo table	16	22%
156	Jump ropes	16	22%
192	Orthotic devices	16	22%
218	Puppets	16	22%
256	Standing table	16	22%
267	Support devices, upper extremities	16	22%
277	Thermometer	16	22%
314	Wrist cuff	16	22%
9	Appointment card	15	21%
64	Computer software	15	21%
67	Counting chips	15	21%
78	Dolls	15	21%

(table continued on next page)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
106	Finger ladder	15	21%
235	Self bonding solvent	15	21%
261	Stool	15	21%
50	Chair, adapted	14	19%
249	Spools	14	19%
294	Tunnel, crawling	14	19%
56	Clamp	13	18%
66	Cork board	13	18%
93	Evaluation kit, feeding	13	18%
125	Gloves, isotoner	13	18%
197	Paraffin bath	13	18%
231	Scale	13	18%
254	Standing box	13	18%
31	Board, prone	12	16%
60	Cold packs	12	16%
98	Exerciser, lower extremities	12	16%
99	Exerciser, staircase	12	16%
163	Laundry equipment and supplies	12	16%
229	Safety straps	12	16%
262	Stool, rolling	12	16%
304	Webbing	12	16%
51	Chair, corner	11	15%
62	Computer equipment, adapted	11	15%
77	Dictaphone or microcassette recorder	11	15%
105	Finger flexion board	11	15%
136	Heating units (hot packs)	11	15%
142	Hot glue gun	11	15%
187	Muscle stimulators, hand operated	11	15%
245	Splints, demonstration/display	11	15%
264	Straps, elastic	11	15%
309	Whirlpool	11	15%
23	Bed pull-up	10	14%
33	Body hammock, adjustable	10	14%
104	Finger abductor	10	14%
199	Parallel bars	10	14%
200	Patient lift	10	14%
225	Rocker balances	10	14%
247	Splints, pressure	10	14%
300	Walker accessories	10	14%
159	Knee abductor	9	12%
176	Mat, incline	9	12%
177	Mat, tumble	9	12%
179	Mat platform	9	12%
252	Stairs, training	9	12%
290	Tray, bed	9	12%
59	Coban	8	11%
79	Door opening adaptive devices	8	11%

(table continued on next page)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
90	Elevation device, leg	8	11%
120	Gardening equipment/supplies	8	11%
130	Hand trainer	8	11%
138	Helmet	8	11%
143	Hot water dispenser	8	11%
148	Hydrocollator	8	11%
170	Lumber	8	11%
182	Micropore tape	8	11%
203	Pelvic belt	8	11%
211	Posture guards	8	11%
226	Rocking chair	8	11%
241	Soldering gun	8	11%
266	Support devices, lower extremities	8	11%
285	Tools, metal working	8	11%
288	Trampoline, jogging	8	11%
301	Water bottle	8	11%
38	Button maker	7	10%
42	Cane accessories	7	10%
49	Cervical pillows	7	10%
110	Foot boot	7	10%
147	Hydraulic lift	7	10%
150	Identification plate maker	7	10%
174	Massager	7	10%
238	Shoulder wheel	7	10%
258	Stepping stone blocks	7	10%
279	Tilting treatment table	7	10%
303	Water table (water/rice/beans)	7	10%
39	Calibrated shoulder wheel	6	8%
53	Chair leg extenders	6	8%
54	Chair lifter seat	6	8%
97	Exerciser, isokinetic	6	8%
116	Functional grip push-up blocks	6	8%
131	Hand-held heat sealer	6	8%
137	Heel pad	6	8%
144	Household cleaning equipment, adapted	6	8%
212	Powder board	6	8%
268	Support molds (abductor, head, back)	6	8%
293	Tuning fork	6	8%
15	Balance logs	5	7%
28	Biofeed back unit	5	7%
70	Crutches	5	7%
71	Curb and ramp platforms	5	7%
74	Cutaneous facilitation brush	5	7%
81	Dumbbell rack	5	7%
95	Evaluation kit, posture	5	7%
134	Heat pac cover	5	7%
162	Ladder, shoulder abduction	5	7%

(table continued on next page)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
180	Matting, non-slip	5	7%
198	Paraffin refill kit	5	7%
230	Sandbag cart	5	7%
239	Shuttles	5	7%
255	Standing frame	5	7%
263	Strap wedges	5	7%
270	Switches	5	7%
295	Two-point Aeshtesiometer	5	7%
302	Water hose	5	7%
315	Wrist roll	5	7%
57	Clavicle strap, contoured	4	5%
88	Electrostimulation unit	4	5%
91	Ergometer	4	5%
117	Gait halter	4	5%
152	Inflator/deflator, electric	4	5%
169	Lumbarpad	4	5%
183	Mineral oil	4	5%
209	Pool therapy equipment/supplies	4	5%
217	Pulse monitor	4	5%
223	Rehabilitation loom	4	5%
287	Training orthosis	4	5%
297	Vigorimeter (measures muscle strength)	4	5%
298	Volumeter set	4	5%
310	Whirlpool accessories	4	5%
311	Whirlpool concentrate	4	5%
26	Bib, holder	3	4%
47	Casting tape	3	4%
82	Dumbbell wagon	3	4%
101	Exerciser, trunk	3	4%
109	Flexion stool	3	4%
135	Heat pad, electric moist	3	4%
149	Hydrocover	3	4%
161	Ladder, low horizontal	3	4%
195	Pads, dispersive	3	4%
273	Tension gauge	3	4%
5	Air flow mat	2	3%
24	Bending irons	2	3%
35	Bubble ball bath	2	3%
46	Cast, fast setting plaster	2	3%
48	Cerebral Palsy feeder	2	3%
58	Climbing stools	2	3%
75	Cybex machine	2	3%
76	Dental applicator	2	3%
111	Foot guard	2	3%
113	Foot placement ladder	2	3%
114	Foot stirrup	2	3%
123	Gloves, asbestos	2	3%

(table continued on next page)

EQPT NO	EQUIPMENT DESCRIPTION	NUMBER USING	PERCENT USING
133	Heat lamp	2	3%
154	Irrigation water, sterile	2	3%
166	Line adjustment clamp	2	3%
171	Manometer (muscle strength)	2	3%
178	Mat hanger	2	3%
189	Number counters	2	3%
196	Pan leveling/positioning	2	3%
201	Pedometer	2	3%
205	Pet therapy equipment/supplies	2	3%
220	Quadricepts board	2	3%
269	Suspension seat, adjustable	2	3%
313	Wrap, strap	2	3%
7	Anthropometric tape measure	1	1%
40	Caliper, skinfold (fat)	1	1%
69	Crutch accessories	1	1%
72	Curb and ramp training set	1	1%
100	Exerciser, treadmill	1	1%
121	Gel warmer	1	1%
122	Genu recuratum	1	1%
126	Gloves, thermo comforter	1	1%
146	Hubbard tank	1	1%
188	Neoprene wraps	1	1%
233	Scoliometer	1	1%
257	Steam packs	1	1%
278	Thermostatic water mixing valves	1	1%
55	Chin-up bar, adjustable	0	0%
112	Foot inversion tread	0	0%
139	Hippo therapy equipment/supplies	0	0%
141	Hot counter	0	0%
153	Intermittent compression unit	0	0%
155	Isolettes	0	0%
160	Kold wrap	0	0%
221	Quadricepts rest	0	0%
253	Stall bars	0	0%
265	Stretcher table	0	0%
272	Tank top seat	0	0%
312	Wrap, seat	0	0%

APPENDIX B

BIBLIOGRAPHY: SOURCES OF STANDARDS

APPENDIX B

BIBLIOGRAPHY: SOURCES OF STANDARDS

1. Writing team of incumbent workers, State of Illinois.

2. Hopkins, H. L., & Smith, H. D. (Eds.). (1988). *Willard and Spackman's occupational therapy*. (7th ed.). Philadelphia, PA: J. B. Cipponeott.

3. Lederman, E. F. (1984). *Occupational therapy: Principles and practice*. Springfield, IL: Charles Thomas.

4. Pedretti, L. W. (1985). *Occupational therapy: Practical skills for physical dysfunction* (2nd ed.). St. Louis, MO: C. V. Mosby.

5. Punwar, A. J. (1988). *Occupational therapy: Principles and practice*. Baltimore, MD: Williams and Wilkins.

APPENDIX C

CROSS-REFERENCE TABLE OF DUTIES, TASKS, AND PERFORMANCE OBJECTIVES

APPENDIX C

CROSS-REFERENCE TABLE

This V-TECS catalog is a cumulation of research activities resulting in a description of the following domain area in terms of occupationally-related duties, tasks, performance objectives, and performance guides.

CIP CODES:	17.0807	Occupational Therapy
	17.0808	Occupational Therapy Aide
	17.0809	Occupational Therapy Assisting

DOT CODES:	076.364-010	Occupational Therapy Assistant
	355.377-010	Occupational Therapy Aide

The following legend for the cross-reference table codes the results of a task analysis from inventory development, to incumbent survey, to data analysis, to catalog completion.

1.	n	The n accompanying an occupational title is the number of respondents to the occupation survey.
2.	%	Column and row percentage indicate survey responses of performance of a task by incumbents.
3.	#	Indicates a write-in task by incumbents during survey.
4.	Note	Indicates a write-in task to catalog by incumbents during development of catalog. "Note" indicates no data collected during survey.

5.	(task)	Indicates that consensus of incumbents was used to reword or edit task statement from original task in inventory. Task in parenthesis is the original task
6.	subscripts	Subscripts are used to indicate subdivision of original task into two or more tasks based upon review and consensus of incumbent workers.
7.	(task,letter	Indicates task includes one or more original tasks number) in original inventory.
	or	
8.	(see task, letter, number)	Task(s) cross-listed into another task(s).
9.	@	An @ indicates accompanying materials are needed and are included in the catalog.
10.	*	Based on analysis of survey data, no performance objective written.
11.	**	A task statement which fell between 1 and 14 percent included in the catalog based upon the incumbent writing team consensus.

CROSS-REFERENCE TABLE

CIP CODES:	17.0807	Occupational Therapy
	17.0808	Occupational Therapy Aide
	17.0809	Occupational Therapy Assisting

DOT CODES:	076.364-010	Occupational Therapy Assistant
	355.377-010	Occupational Therapy Aide

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
A. PERFORMING ADMINISTRATIVE TASKS			
01 File patient's records.	1/18	77	83
02 Review departmental mail.	2/20	56	50
03 Plan meeting.	3/22	40	33
04 Participate in interdisciplinary care plan meeting or staffing.	4/24	84	53
05 Complete charge slip form.	5/25	54	37
06 Complete travel reimbursement form.	6/27	44	13
07 Schedule patient's appointment.	7/29	65	67
08 Schedule space and equipment for therapy.	8/31	74	70
# Develop master therapy schedule.	9/33	#	#
09 Maintain attendance records.	10/35	91	87
10 Supervise assistants, aides and volunteers.	11/37	51	50
11 Train occupational therapy assistants, aides, volunteers and support persons.	12/39	51	50
12 Assist with a student's clinical experience.	13/41	51	27
13 Develop facility's guidelines of quality treatment.	14/43	23	3
14 Update facility's guidelines of quality treatment.	15/45	35	10
15 Collect information for quality assurance measures. (Perform quality assurance measures.)	16/47	49	37
16 Develop facility's preprinted home program.	17/48	28	7
17 Update facility's preprinted home programs.	18/51	40	13
18 Maintain occupational therapy resource library.	19/52	40	23
19 Collect information for budget preparation.	20/54	26	27

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY A. PREFORMING ADMINISTRATIVE TASKS (cont.)			
* 20 Collect information for marketing strategies.	*	5	7
* 21 Conduct patient satisfaction survey.	*	9	10
22 Compile departmental data.	21/56	40	30
23 Write occupational therapy position job description.	22/57	21	3
* 24 Contract for building adaptive equipment.	*	14	7
25 Complete work order for equipment.	23/59	26	17
* 26 Participate in board meetings.	*	9	10
DUTY B. COMMUNICATING INFORMATION			
01 Communicate using intercom.	24/60	54	63
02 Communicate using telephone.	25/61	98	77
03 Greet patient or visitor.	26/63	81	87
04 Respond to request for service.	27/65	74	90
05 Respond to request of patient's funding source.	28/66	26	10
06 Conduct public relations activities.	29/67	37	13
07 Refer patient to specialized service.	30/69	58	27
08 Notify consulting occupational therapist or physician about developments requiring changes in patient's occupational therapy treatment plan.	31/70	95	77
09 Notify patient, family or significant others about developments requiring changes in patient's occupational therapy treatment plan.	32/72	84	53
* 10 Notify patient's funding source of treatment plan.	*	18	7
11 Discuss patient information.	33/74	84	70
12 Write instructions for use of orthosis, prostheses or adaptive equipment.	34/76	67	13
13 Write instructions for an occupational therapy home program.	35/78	61	13
14 Write thank you letter.	36/80	23	10
15 Write progress notes.	37/81	98	80
16 Write discharge note.	38/83	65	20
17 Complete consent form.	39/85	35	10
* 18 Complete administrative report.	*	12	3
19 Create informational displays.	40/87	33	20
20 Identify possible abuse.	41/89	42	43
21 Report unsafe condition.	42/91	72	73
22 Secure emergency help.	43/93	54	60

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY B. COMMUNICATING INFORMATION (cont.)			
* 23 Train patients and staff in evacuation procedures.	*	9	10
24 Answer inspector's questions.	44/94	23	60
** 25 Give professional testimony.	45/95	15	10
DUTY C. PERFORMING DIAGNOSTIC MEASURES			
01 Screen patient for need of occupational therapy evaluation.	46/97	56	40
02 Assist with screening of patient for need of occupational therapy evaluation.	47/99	79	70
03 Select evaluation components to be evaluated.	48/100	49	17
04 Plan evaluation methodology.	49/101	37	3
05 Explain evaluation plan.	50/102	47	20
06 Conduct an interview.	51/103	51	10
07 Administer test following standard procedures.	52/105	65	13
08 Analyze evaluation data.	53/107	49	17
09 Formulate evaluation recommendations.	54/108	47	3
10 Record evaluation information and recommendations.	55/109	51	37
* 11 Evaluate patient for abuse.	*	7	3
* 12 Evaluate patient for substance abuse.	*	0	3
* 13 Evaluate worksite.	*	14	7
14 Evaluate home or work site. (Evaluate home.)	56/110	23	7
DUTY D. PLANNING THERAPEUTIC MEASURES			
01 Develop a patient's occupational therapy treatment plan.	57/112	54	20
02 Assist in developing a patient's occupational therapy treatment plan.	58/114	74	50
03 Implement a new patient's occupational therapy orders.	59/115	84	77
04 Formulate recommendations for changes in treatment plan.	60/116	70	57
# Complete prescription forms.	61/117	#	#
05 Analyze tasks and activities.	62/118	77	43
06 Coordinate the occupational therapy treatment plan with support persons. (Coordinate the occupational therapy treatment plan with staff, family, patient and other services.)	63/120	77	43

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY D. PLANNING THERAPEUTIC MEASURES (cont.)			
* 07 Calculate drive time for patient visit.	*	14	7
08 Plan a group activity.	64/122	56	53
09 Assist specialist (podiatrist, orthotist or wheelchair vendor) with selection of adaptive equipment.	65/124	35	13
DUTY E. IMPLEMENTING THERAPEUTIC MEASURES			
01 Prepare therapy area.	66/125	98	100
02 Build rapport with patient.	67/127	91	90
03 Give patient therapeutic massage.	68/129	35	23
04 Give patient heat therapy.	69/130	16	27
05 Give patient cold therapy.	70/132	14	13
* 06 Give patient hydrotherapy.	*	5	17
07 Train patient in eating skills.	(see PO 71)	70	57
08 Train patient in feeding skills.	(see PO 71)	72	40
# Train patient in eating and feeding skills. (Train patient in eating skills. E-7 and Train patient in feeding skills. E-8)	71/134		
* 09 Train patient in self administration of medication.	*	12	7
10 Train patient in dressing skills.	72/136	88	57
11 Train patient in clothing care skills.	73/139	54	40
12 Train patient in food preparation skills.	74/141	54	33
13 Train patient in grooming and hygiene skills.	75/144	74	60
14 Train patient in money management skills.	76/146	40	27
15 Train patient in time-management skills.	77/148	54	30
16 Train patient in shopping skills.	78/150	30	13
* 17 Train patient in home repair skills.	*	9	
18 Train patient in home-cleaning skills.	79/152	40	3
** 19 Train patient in parental skills.	80/154	7	3
20 Train patient in employment preparation skills.	81/156	28	20
21 Train patient in functional communications skills.	82/157	51	40
22 Train patient in object manipulation skills.	83/158	72	57
23 Train patient in play and leisure activities.	84/160	67	57
24 Train patient in relaxation techniques.	85/162	54	33
25 Train patient in assertive behaviors.	86/164	21	30
26 Train patient in energy conservation techniques.	87/166	54	13

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY E. IMPLEMENTING THERAPEUTIC MEASURES (cont.)			
27 Train patient in joint protection techniques.	88/168	56	23
28 Train patient in use of public transportation.	89/170	19	17
29 Train patient in functional ambulation.	90/172	26	27
30 Train patient in transfer techniques.	91/174	56	33
31 Train patient in wheelchair mobility.	92/176	63	33
32 Train patient in bed mobility.	93/177	44	33
33 Engage patient in purposeful activities for fine and gross motor coordination.	94/178	91	90
34 Engage patient in purposeful activities for strength.	95/180	88	77
35 Engage patient in purposeful activities for endurance.	96/182	81	80
36 Engage patient in purposeful activities for range of motion.	97/184	81	83
37 Engage patient in purposeful activities for reflex integration.	98/186	65	30
38 Engage patient in purposeful activities for sensory awareness	99/188	86	77
39 Engage patient in purposeful activities for sensory motor integration.	100/190	72	60
40 Engage patient in purposeful activities for visual perception.	101/192	93	67
41 Engage patient in purposeful activities for body awareness.	102/194	88	73
42 Engage patient in purposeful activities for cognitive skills.	103/196	84	73
43 Engage patient in purposeful activities for cognitive integration skills.	104/198	70	43
44 Engage patient in purposeful activities for self-concept.	105/200	61	53
45 Engage patient in purposeful activities for situational coping skills.	106/203	49	43
46 Engage patient in purposeful activities for community involvement.	107/205	33	3
47 Supervise exercises in visual tracking.	108/207	58	23
48 Supervise exercises in range of motion.	109/208	70	53
49 Supervise work hardening activities.	110/210	19	17
50 Train patient in use of orthosis.	111/212	30	17
51 Train patient in use of prosthesis.	112/214	23	20
52 Train patient in use of adaptive equipment.	113/216	70	43

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY E. IMPLEMENTING THERAPEUTIC MEASURES (cont.)			
53 Retrain patient in hand dominance.	114/218	51	27
54 Design system of positive and negative reinforcement.	115/220	30	23
55 Provide supportive listening.	116/222	79	93
56 Provide supportive environment with increasing stimulation.	117/224	56	57
57 Assess reality orientation and reorient patient.	118/226	54	60
58 Conduct group activities.	119/227	58	57
59 Identify role models.	120/229	30	13
60 Arrange for use of community and educational resources.	121/230	21	17
DUTY F. PROVIDING SUPPORT SERVICES			
01 Verify patient's identification.	122/232	47	40
02 Transport patient.	(see PO 124)	56	73
03 Assist patient in pain.	123/234	37	33
04 Escort patient to and from waiting area, dressing room, examination room, or therapy room.	(see PO 124)	61	77
# Escort patient. (Escort patient to and from waiting area, dressing room, examination room, or therapy room. F-4 and Transport patient. F-2)	124/236	#	#
05 Position patient.	125/237	77	57
06 Perform patient transfers.	126/239	70	53
07 Modify patient's home or work environment	127/241	47	10
08 Assist patient in toileting during therapy.	128/243	70	43
09 Measure intake and output during therapy.	129/245	19	7
10 Monitor patient's vital statistics during therapy.	130/246	47	30
11 Report patient's behavioral statistics observed during therapy.	131/247	65	77
* 12 Change patient's bandage.	*	14	3
13 Assist patient in dressing and undressing.	132/249	56	30
14 Assist patient with assistive/supportive devices.	133/252	56	50
15 Wash hands and arms aseptically.	134/254	54	33
16 Develop individualized functional communication devices.	135/255	21	10
17 Develop individualized memory assisting devices.	136/258	28	17

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY F. PROVIDING SUPPORT SERVICES (cont.)			
* 18 Conduct job placement surveys.	*	2	0
* 19 Initiate job placements.	*	0	0
* 20 Follow up job placements.	*	2	0
21 Inventory supplies.	(see PO 137	70	50
# Inventory supplies and equipment. (Inventory supplies. F-21 and Inventory equipment. F-24)	137/260	#	#
22 Order supplies.	(see PO 138)	70	60
# Order supplies and equipment. (Order supplies. F-22 and Order equipment. F-25)	138/261	#	#
23 Stock supplies.	(see PO 139)	61	50
# Stock supplies and equipment. (Stock supplies. F-23 and Store equipment. F-26)	139/262	#	#
24 Inventory equipment.	(see PO 137)	70	57
25 Order equipment.	(see PO 138)	61	60
26 Store equipment.	(see PO 139)	65	70
27 Assemble equipment.	140/263	58	57
28 Evaluate equipment condition.	141/264	63	57
29 Repair equipment.	142/265	42	20
* 30 Ship equipment.	*	2	10
31 Design adaptive equipment.	143/266	42	10
32 Build adaptive equipment.	144/268	49	13
33 Make low temperature thermo-plastic splints.	145/269	40	10
34 Transport supplies to and from therapy area.	146/272	84	63
35 Setup supplies for therapy.	147/273	91	87
36 Clean therapy area.	148/274	86	93
37 Follow evacuation procedures.	149/275	72	87
DUTY G. CONTINUING EDUCATION			
01 Apply for certification/licensing.	150/276	77	33
02 Apply for recertification. (See task G-1)	(see G-1)	40	10
# Apply for certification or recertification. (Apply for certification/licensing. G-1 and Apply for recertification. G-2)	150/276	#	#
03 Maintain first aid/CPR certification.	151/277	65	43
04 Review professional research journals.	(see PO 152	88	23
# Review professional research journals or sales catalogs. (Review professional research journals. G-4 and Review a sales catalog. G-12)	152/278	#	#
05 Participate in professional meetings.	153/279	74	57
06 Present information at professional meeting.	154/281	47	40

DUTIES TASKS	PERFORMANCE OBJECTIVE/ PAGE NUMBERS	PERCENT PERFORMING OTO	
		DOT 1 N=43	DOT 2 N=30
DUTY G. CONTINUING EDUCATION (cont.)			
07 Maintain professional association membership.	155/283	67	3
08 Participate in occupational therapy in-services and workshops.	156/284	86	70
09 In-service occupational therapy staff following a continuing education course.	157/286	44	23
10 Discuss ethical considerations with peers/superiors.	158/288	61	33
11 Discuss procedural considerations with peers/superiors.	159/290	74	60
12 Review a sales catalog.	(see PO 152)	74	73

* (n = 43) DOT 1 - OCCUPATIONAL THERAPY ASSISTANT (076.364-010)
** (n = 30) DOT 2 - OCCUPATIONAL THERAPY AIDE (355.377-010)
*** (n = 73) COMBINED DOT 1 & 2

APPENDIX D

BIBLIOGRAPHY: STATE-OF-THE-ART LITERATURE

APPENDIX D

BIBLIOGRAPHY: STATE-OF-THE-ART LITERATURE

1. Ad Hoc Commission on Occupational Therapy Manpower. (1985). Occupational therapy manpower: A plan for progress. Rockville, MD: American Occupational Therapy Association.

2. Allen C. K. (1986). Cognitive disabilities: Occupational therapy assesment and management. Boston, MA: Little, Brown & Co.

3. Amary I. B. (1980). The rights of the mentally retarded-developmentally disabled to treatment and education. Springfield, IL: Charles C Thomas.

4. American Occupational Therapy Association. (1980). AOTA member handbook. Rockville, MD: American Occupaitonal Therapy Association.

5. American Occupational Therapy Association. (1984). Practice division. Independent living. Rockville, MD: American Occupational Therapy Association.

6. American Occupational Therapy Association. (1985). Long-term care/nursing homes. Rockville, MD: American Occupational Therapy Association.

7. American Occupational Therapy Association. (1985). Practice division. Home health. Rockville, MD: American Occupational Therapy Association.

8. American Occupational Therapy Association. (1987). Guidelines for occupational therapy services in school systems. Rockville, MD: American Occupational Therapy Association.

9. Anderson H. (1981). The disabled homemaker. Springfield, IL: Charles C. Thomas.

10. Anthony W. A. (1979). Principles of psychiatric rehabilitation. Amherst, MA: Human Resource Development Press.

11. Ayres, A. J. (1972). Sensory integration and learning disorders. Los Angeles, CA: Western Psychological Services.

12. Ayres A. (1979). Sensory integration and the child. Los Angeles, CA: Western Psychological Services.

13. Bair, Gray (eds). (1985). The occupational therapy manager. Rockville, MD: American Occupational Therapy Association.

14. Baloh, R. W., & Honrubia, V. (1979). Clinical neurophysiology of the vestibular system. Philadelphia, PA: F. A. Davis Co.

15. Barris R., Kielhofner G., & Watts J. (1984). Psychosocial occupational therapy: Practice in a pluralistic arena. Laurel, MD: Ramsco.

16. Bennett, G. K. (1965). Hand tool dexterity test, manual of directions. New York, NY: Psychological Corp.

17. Binder-Macleod C., & Walden G. (1983). Occupational therapy in practice (Vol. 1). Rockville, MD: American Occupational Therapy Association.

18. Briggs A. B., & Agrin A. R.(eds). (1981). Crossroads: A reader for psychosocial occupational therapy. Rockville, MD: American Occupational Therapy Association.

19. Butler R., & Lewis M. (1977). Aging and mental health: Positive psychosicial approaches (2nd ed). St. Louis, MO: C. V. Mosby.

20. Clark P., & Allen A. (eds). (1985). Occupational therapy for children. St. Louis, MO: C. V. Mosby.

21. Crepeau E. (1986). Activity programming for the elderly. Boston, MA: Little, Brown & Co.

22. Crewe N., & Zolak K. (1983). Independent living for physically disabled people. San Francisco, CA: Jossey-Bass.

23. Cynkin S. (1979). Occupational therapy: Toward health through activities. Boston, MA: Little, Brown & Co.

24. Davis L., Kirkland M. (eds.). (1986). The role of occupational therapy with the elderly (ROTE). Rockville, MD: American Occupational Therapy Assocation.

25. Duconis A., & Golin A. (1979). Educating for team work: The interdisciplinary health care team. Germantown, MD: Aspen Systems.

26. Farber S. D. (1982). Neurorehabilitation: A multisensory approach. Philadelphia, PA: W. B. Saunders.

27. Frazian B. (1986). Private practice information packet. Rockville, MD: American Occupational Therapy Association.

28. Gale Research Company. (1982). Medical and health information directory. Detroit, MI: Author.

29. Gilfoyle, E. (editor). (1980). Training: Occupational therapy educational management in schools (Vol. 4). Rockville, MD: American Occupational Therapy Association.

30. Government and Legal Affairs Division. (1977). Final regulation, PL 94-142, Education of all handicapped children act (Federal Report 77). Rockville, MD: American Occupational Therapy Association.

31. Harrington, D. O. (1976). The visual fields (4th ed.). St. Louis, MO: C. V. Mosby.

32. Hopkins, H., & Smith, H. (1988). Willard and Spackman's occupational therapy (7th ed.). Philadelphia, PA: J. B. Lippincott.

33. Illinois Department of Employment Security. (1988). Occupational projections: State of Illinois 1984-1995. Chicago, IL: Research and Analysis Department.

34. Illinois Department of Labor--Bureau of Employment Security. (1986). 1982-1995 Occupational projections. Chicago, IL: Research and Analysis Department.

35. Illinois Department of Public Health. (1988). Licensed home health agency directory. Springfield, IL: Author.

36. Illinois Department of Public Health. (1988). Long-term care facilities. Springfield, IL: Author.

37. Illinois Department of Public Health. (1988). Medicare certified rehabilitation programs. Springfield, IL: Author.

38. Illinois State Board of Education. (1987). Special education directors. Springfield, IL: Author.

39. Johnstone, M. (1978). Restoration of motor function in the stroke patient. New York, NY: Churchhill Livingstone, Inc.

40. Keilhofner G. (ed). (1985). A model of human occupation: Theory and application. Baltimore, MD: Williams & Wilkins.

41. Kielhofner G. (ed.) (1983). Health through occupation: Theory and practice in occupational therapy. Philadelphia, PA: F. A. Davis.

42. Lederman, E. F. (1984). Occupational therapy: Principles and practice. Springfield, IL: Charles Thomas.

43. Lewis S. (1979). The mature years: A geriatric occupational therapy text. Thorofare, NJ: Slack.

44. Maguire G. (1985). Care of the elderly: A health team approach. Boston, MA: Little, Brown & Co.

45. Mason M. (1986). The roles of occupational therapists in continuity of care. Binghamton, NY: Haworth.

46. Mosey A. (1981). Occupational therapy: Configuration of a profession. New York, NY: Raven Press.

47. Mosey A. C. (1973). Activities therapy. New York, NY: Raven Press.

48. National Occupation Information Coordinating Committee. (1982). Vocational preparation and occupations (3rd ed.) Vol. 1: Educational and occupational code crosswalk. Washington, DC: U.S. Department of Education.

49. Pedretti, L. W. (1985). Occupational therapy: Practical skills for physical dysfunction (2nd ed.). St. Louis, MO: C. V. Mosby.

50. Punwar, A. J. (1988). Occupational therapy: Principles and practice. Baltimore, MD: Williams and Wilkins.

51. Reed K., & Sanderson S. (1983). Concepts of occupational therapy (2nd ed.). Baltimore, MD: Williams & Wilkins.

52. Research Information and Evaluation Division. (1986). Eduation data survey (Final Report). Rockville, MD: American Occupational Therapy Association.

53. Rourk J., Andrews J., Dunn W., Stephens L., & Wendt G. (1986). Guidelines for occupational therapy services in schools. Rockville, MD: American Occupational Therapy Association.

54. Ryan S. (1986). The certified occupational therapy assistant: Roles and responsibilities. Thorofare, NJ: Slack.

55. Shires, T. G. (1979). Care of the trauma patient (2nd ed.). New York, NY: McGraw-Hill, Inc.

56. Siev, E., & Frieshtat, B. (1976). Perceptual dysfunction in the adult stroke patient. Thorofare, NJ: Slack.

57. Strauss A., & Glaser B. (1975). Chronic illness and the quality of life. St. Louis, MO: C. V. Mosby.

58. Trexler, L. E. (editor). (1982). Cognitive rehabilitation, conceptualization and intervention. New York, NY: Plenum Publishing Corp.

59. Trombly C., & Scott A. (eds). (1977). Occupational therapy for physical dysfunction. Baltimore, MD: Williams & Wilkins.

60. Tulanian M., Hammond S., & Tulanian S. (1985). The business management of private practice: Occupational therapy, physical therapy. Middletown, CA: Applied Educational Systems.

61. United State Department of Labor. (1977). Dictionary of occupational titles. Washington, DC: Employment of Training Administration.

62. United State Department of Labor. (1986). Employment projections for 1995: Data and methods (Bulletin 2253). Washington, DC: U.S. Printing Office.

63. United State Department of Labor. (Spring, 1986). Occupational outlook quarterly. Washington, DC: U.S. Government Printing Office.

64. United States Department of Labor. (1986). Occupational outlook handbook (Bulletin 2200). Washington, DC: U.S. Government Printing Office.

65. United States Department of Labor. (1988). Occupational outlook handbook (Bulletin 2300). Washington, DC: U.S. Government Printing Office.

66. United States Department of Labor. (1988). Occupational projections and training data (Bulletin 2301). Washington, DC: U.S. Government Printing Office.

67. United States Department of Labor. (Fall, 1987). Occupational outlook quarterly. Washington, DC: U.S. Government Printing Office.

68. U.S. Department of Health and Human Services Health Care Financing Administration. (1981). *Health Insurance System*. Washington, DC: U.S. Department of Health and Human Services Health Care Financing Administration.

69. Wise H., Beckhard R., & Rubin, I. (1974) *Making health teams work*. Cambridge, MA: Ballinger Publishing.

70. World Federation of Occupational Therapists. (1980). *Survey on recognized training of support staff*. London, ONT: University of Western Ontario.

71. World Federation of Occupational Therapists. (1984). *Survey on private practice and consultation*. London, ONT: University of Western Ontario.

72. World Federation of Occupational Therapists. (1985). *Annual reports of member organizations*. London, ONT: University of Western Ontario.

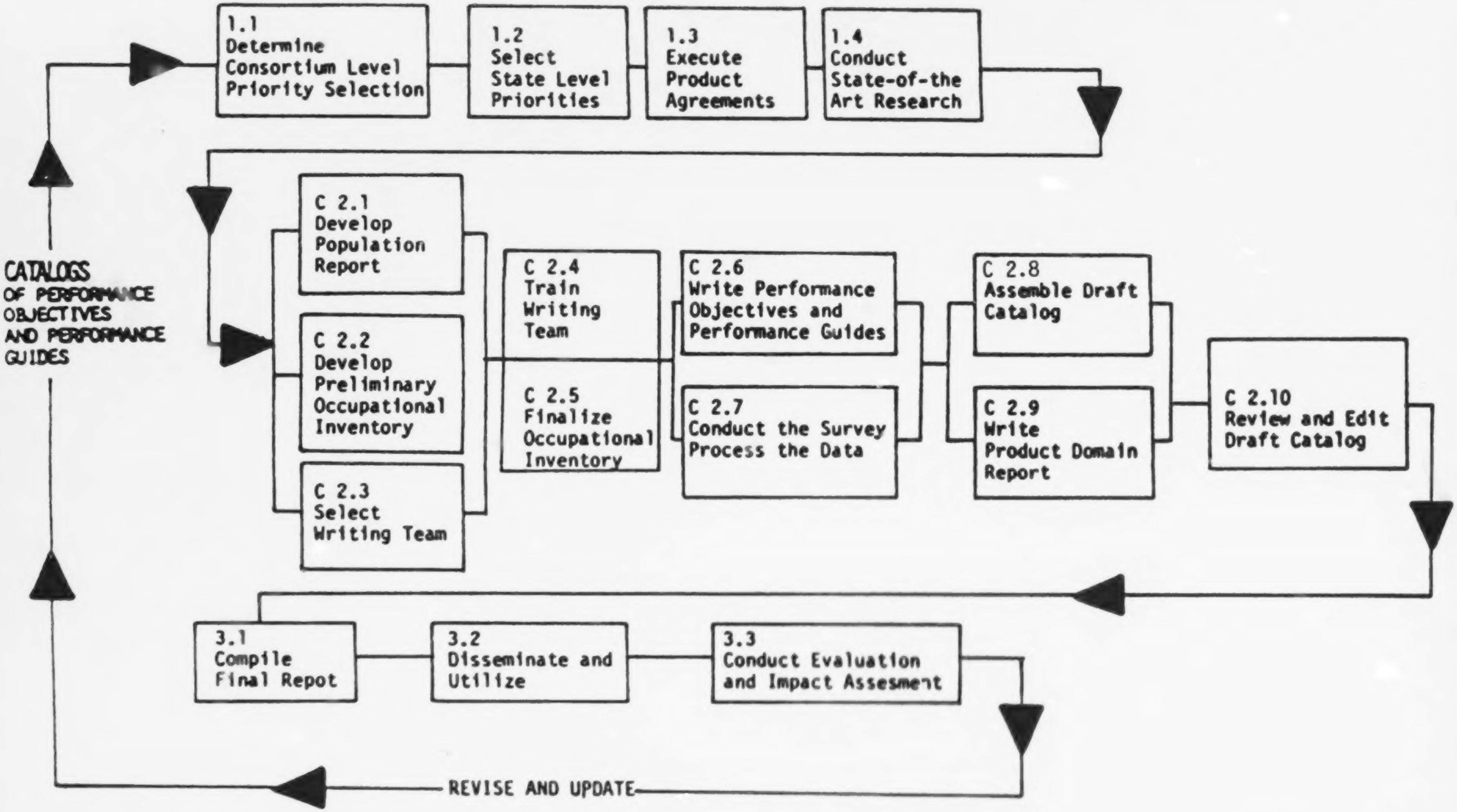
73. World Federation of Occupational Therapists. (1985). *List of WFOT - Approved schools*. London, ONT: University of Western Ontario.

74. World Federation of Occupational Therapists. (1986). *World federation of occupational therapists*. London, ONT: University of Western Ontario.

APPENDIX E

V-TECS CATALOG DEVELOPMENT MODEL

CATALOG DEVELOPMENT MODEL


1.1 Determine Consortium Level Priority Selection
1.2 Select State Level Priorities
1.3 Execute Product Agreements
1.4 Conduct State-of-the Art Research
C 2.1 Develop Population Report
C 2.2 Develop Preliminary Occupational Inventory
C 2.3 Select Writing Team
C 2.4 Train Writing Team
C 2.5 Finalize Occupational Inventory
C 2.6 Write Performance Objectives and Performance Guides
C 2.7 Conduct the Survey Process the Data
C 2.8 Assemble Draft Catalog
C 2.9 Write Product Domain Report
C 2.10 Review and Edit Draft Catalog
3.1 Compile Final Repot
3.2 Disseminate and Utilize
3.3 Conduct Evaluation and Impact Assesment
CATALOGS OF PERFORMANCE OBJECTIVES AND PERFORMANCE GUIDES
REVISE AND UPDATE